ROUTING SLIP FOR INVOICES

DATE March 21, 2	2018	CONTRAC	CTOR Fam	ily Values
		CFMS 2	000234086	
		MONTH OF	SERVICE	February-2018
TO Norman			×	
INITIAL REVIEW _	NS	~ × 5	DATE	63/22/18
FSPS2 REVIEW			DATE	
Program Manager 1	/2	<u></u>	DATE	7/1/16
POSTED TO SPREA	ADSHEET 03	3/22/18		
SENT TO FISCAL		EQUIPMEN	NT TO BE T	AGGED?
ADVANCE RECOUP	PMENT?			
COMMENTS:				
	From Co Totals 13/620. Paid for 14,375.	A Get en Artracter on paid for Salaries w/ Salaries w/ Salaries por Tryonic 23 - Whitney Part 17 - Different	planating in ubtahada 12	Complete this voice to request Budget and Agreem with Subcontractors
	.,			

Norman Shropshire

From:

Norman Shropshire

Sent:

Wednesday, April 04, 2018 11:40 AM

To:

'barbarat@family-values.org'

Cc:

'talishad@fvri.org'

Subject:

February 2018 Invoice image2018-04-04-113346.zip

Good Morning,

Attachments:

Attached is a copy of the February 2018 invoice for your record.

Contact me if you have any questions.

Thank You

Norman Shropshire

ES Program Consultant
Dept. Of Children And Family Services
627 N. Fourth St.,5-315
Baton Rouge, LA 70802
Norman.Shropshire@la.gov
Phone (225)219-2742
Fax (225)342-2536



Economic Stability
Division of Programs
627 North 4th Street
Baton Rouge, LA 70802

(0) 225.342.4051 (F) 225.342.2536 www.dcfs.la.gov

John Bel Edwards, Governor Marketa Garner Walters, Secretary

4 /4/18
Date 03/22/2018

MEMORANDUM

TO:

OM&F Fiscal

Contract Payments

FROM:

Dora Thomas

Program Manager

RE:

Invoice for payment

PO # 2000234086

Contractor Name: Family Values Resource Institute

Please find attached an invoice for payment.

If you have any questions, contact: Norman Shropshire (225) 219-2742.

Attachment

An Equal Opportunity Employer • Child Welfare Prog .ms Accredited by the Council on Accreditation for Children and Family Services



DEPARTMENT OF CHILDREN AND FAMILY SERVICES Cost Reimbursement through Form

MAR 2 1

DCF Economic:

-
FEBRUARY 2018
Service Period
2000234086
Contract/CFMS#
GFEBRUARY 2018- 234086 0218
Invoice Number

EXPENDITURES

EXPENDITURE CATEGORY (A)	APPROVED BUDGET (B)	CURRENT PERIOD EXPENDITURES (C)	PRIOR PERIOD EXPENDITURES (D)	CUMULATIVE EXPENDITURES (E)	REMAINING CONTRACT BALANCE (F)	COST SHARING (G)
PERSONNEL	\$172,500.00	\$14,375.00	\$100,624.93	\$114,999.93	\$57,500.07	
FRINGE BENEFITS	\$22,235.25	\$1,099.68	\$8,228.17	\$9,327.85	\$12,907.40	
TRAVEL	\$1,000.00	\$0.00	\$782.90	\$ 782.90	\$ 217.10	
OPERATING SERVICES	\$52,564.75	\$2,874.68	\$29,142.70	\$32,017.38	\$20,547.37	
SUPPLIES	\$0.00	\$0.00	\$0.00	\$ 0.00	\$ 0.00	
PROFESSIONAL SERVICES	\$63,900.00	\$8,309.72	\$30,851.47	\$39,161.19	\$24,738.81	
OTHER CHARGES	\$216,000.00	\$16,600.00	\$99,800.00	\$116,400.00	\$99,600.00	
EQUIPMENT/ ACQUISITIONS	\$1,000.00	\$0.00	\$1,000.00	\$1,000.00	\$ 0.00	
INDIRECT COST	\$0.00	\$0.00	\$0.00	\$ 0.00	\$ 0.00	\$0.00
TOTALS	\$529,200.00	\$43,259.08	\$270,430.17	\$313,689.25	\$215,510.75	\$ 0.00

Contractor Certification

issued, and the	at the services were	ailed above are correct rendered in according to the correct to the correct rendered in according to the correct rendered rendered in according to the correct rendered rende	lance with the term	or these services has not s and conditions of the conditions of th	t been previously contract.	
		FOR D	CFS USE ONLY			
DCFS Invoice Number	Org 4/374	Obj 3746	Rep Cat 507/	Sub Obj	ACTV	
	Org	Obj	Rep Cat	Sub Obj	ACTV	
	Ora	Obi	Ren Cat	Sub Obi	ACTV	

Program Compliance Approval I certify that the expenditures have been reviewed in accordance with contract and program guidelines and deliverables have been received.

Signature and Title of Authorized DCFS Official

4/4/18 Date

Mal

1

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 37 DD

ALLISON DAVIS 17232 JEFFERSON HIGHWAY APT # 417 BATON ROUGE LA 70817

Education Special 184-100%

				Stul	5 1
PERSONAL AND CHECK INFORMATION Allison Davis	EARNINGS	DESCRIPTION	HRS/UNITS	RATE THIS PERIOD (\$)	YTD HOURS YTD (\$)
17232 Jefferson Highway		Fvri		1041.66	1041.66
Apt # 417 Baton Rouge, LA 70817		LAL Hours			2083.33
Soc Sec #: xxx-xxxx Employee ID: 37		Total Hours Gross Earnings		1041.66	3124.99
Home Department: 100 Staff Bi-weekly		Total Hrs Worked			
	WITHHOLDINGS	DESCRIPTION	FILING STATUS	THIS PERIOD (\$)	YTD (\$)
Pay Period: 02/01/18 to 02/15/18 Check Date: 02/15/18 Check #: 6786		Social Security		64.58	193.75
NET PAY ALLOCATIONS		Medicare LA Income Tax	S 2 1	15.10 25.00	45.31 75.00
DESCRIPTION THIS PERIOD (\$) YTD (\$)					
Check Amount 0.00 0.00	DEDUCTIONS	TOTAL DESCRIPTION		104.68 THIS PERIOD (\$)	314.06
Chkg 3799 911.01 2733.02	DEDUCTIONS	DESCRIPTION		THIS FERIOD (3)	YTD (\$)
NET PAY 911.01 2733.02		STD Post-Tax		25.97	77.91
		TOTAL		25.97	77 91
S-0.					
talary.			*,		
Strub 1 1041. lob		Fring	2.1		
Strub 1 1041. lolo		7			
07 CO 1 1096. (1)	-	~			
C. 1 - 11117		2083.	27		
Stub 2 104161		000000			1,11/11/16
		W. A.	1 57		
\$ 2083.33		X 7.4	0) 10		1719417111 T
W & CO 7. 22				Calary	7 dt - 11
	,	41 150	01	ر ۳۰۰۰	7.600 %
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grant ant.		A		Cange	1,041+67 + -2,631+33 x 7+65 x -159+57 +
anant amt.		71		(4. 2	
			,		
V			amt		
	1	mant "			
		part.			
	NET PAY			THIS PERIOD (\$)	YTD (\$)
				911.01	2733.02
Establish De Paradical Inc					

0060 0060-T846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874

DEPARTMENT OF Children and Family Services OFFICE OF FAMILY SUPPORT MONTHLY BILLING FORM

Alternatives to Abortion

CONTRACTOR: Family Values Resource

Institute, Inc.

ADDRESS:

7515 Scenic Hwy.

MAR 2 1 2018

CFMS:

2000234086

CCDDITARY

DOFS. **Economic Stability**

Rep. Cat. 5071 Org. 4274

Baton Rouge, LA 70807

MONTH AND YEAR

SERVICE:

CONTACT PERSON:

Barbara Thomas

PH

ÇOST RE	IMBURSEMENT: Personnel Services	
Staff:	Project Director	\$ 3,750.00 🗸
	Project Adm.	\$ 2,333.34
	Educ. Specialist	\$ 2,083.33
	Compliance Coordinator	\$ 2,041.67
	Data Entry Specialist	\$ 2,083.33
	Client Svcs. Coord./Care Provider	\$ 2,083.33
	Fringes	\$ 1,099.68
	rillyes	Ψ 1,000.00

SUBTOTAL \$ 15,474.68

Total Fring

OTHER EXPENSES

ENSES:
Rent
Utilities
Printing
Copier Lease
Travel
Postage
Office Supplies
Service Provider Trn.
Telephone
Internet
Online Client Database
Accounting/Bookkeeping Services
Subcontractors

		5-
Φ.	4 000 00	1774
\$	1,200.00	190. 4
\$	0.00	19641
<u>\$</u>	0.00	Para x
\$	196.90	19945
\$	0.00	7911114
\$	13.45	
\$	0.00	= + [] + +
\$	0.00	
\$	250.00	0,5
\$	75.00	
\$	140.00	
\$	2,609.72	
\$	16.600.00	







Page: 1 of 3

Statements Dates 02/01/2018 - 02/28/201

Account Number:

16840000

Images:

3

* IMAGE * EO

Return Service Requested

110000 003

FAMILY VALUES RESOURCE INSTITUTE INC RESTRICTED FUNDS P O BOX 74403 **BATON ROUGE LA 70874**

> WE'RE READY TO LEND WITH GREAT RATES ON PERSONAL LOANS. TO APPLY CALL 1-800-965-LOAN. NORMAL CREDIT CRITERIA APPLY.

* * * * * * * * * * * CHECKING ACCOUNT SUMMARY * * * * * * * * * *

Checking Account Summary

PREVIOUS BALANCE

4 CREDITS

16 DEBITS

- SERVICE CHARGES

INTEREST PAID

ENDING BALANCE

AVERAGE BALANCE

YTD INTEREST PAID

* * * * * * * * * CHECKING ACCOUNT TRANSACTIONS * * * * * * * *

Deposits and Other Credits

Amount Description

Date

Amount Description

Checks

Date

Serial

Amount

Date

Serial

Amount

• Other Debits

Date

Amount Description

Date

Amount Description

02/14

6,810.10 PAYROLL

PAYCHEX INC.

018044002131598CCD 6,810.13 PAYROLL PAYCHEX INC. Hancock Whitney Bank

Fringe Proof of Payment - Month of February 2018

THANCOCK WHITNEY

Transactions Details

Posting Date 03/15/2018

Transaction Date 03/15/2018

Description

Transaction Type Debit

Amount \$3,562.53

Balance

Raymond For Munth of Feb. 2018

TAXPAYER NAME: FAMILY VALUES RESOURCE INSTITUTE



HOME ENROLLMENT MY PROFILE

PAYMENTS HELP & INFORMATION CONTACT US

LOGOUT

TIN: xxxxx5039

MAKE A TAX PAYMENT CANCEL A TAX PAYMENT

CHECK PAYMENT HISTORY

Payment Details 0

Your payment details are listed below. The highlighted 8 digits of the EFT Acknowledgement Number represent your trace number.

| Payment Information | Entered Data | |
|---|---------------------------|---|
| Taxpayer EiN | xxxxx5039 | 0 |
| EFT Number
(Acknowledgement Number) | 270847451433579 | 0 |
| Cancellation EFT (Acknowledgement Number) | | 0 |
| Tax Form | 941 Employers Federal Tax | 0 |
| Тах Туре | Federal Tax Deposit | 7 |
| Tax Period | Q1/2018 | • |
| Total Payment Amount | \$3,562.53 | 0 |
| Payment Input Method | Web | 0 |
| Settlement Date | 2018-03-15 | 0 |
| ACH Trace Number | 061036010027777 | • |
| Payment Status | Settled | ? |
| Original EFT
(Acknowledgement Number) | 2708474 51433579 | • |
| Transaction Type | ACH Debit Payment-DDA | 0 |
| Received Date | 2018-03-12 | 2 |
| Received Time (ET) | 17.01,15 | 0 |
| Cancellation Date | | 8 |

■ PREVIOUS

Home Enrollment

My Profile

<u>Payments</u>

Help & Information

Contact Us

Logout

USA gav IRS gov Treasury gov Electronic Federal Tax Payment System's and EFTPS% are registered servicemarks of the U.S. Department of the Treasury's Financial Management Service

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 11 DD

BARBARA J THOMAS 7081 MODESTO AVE BATON ROUGE LA 70811

Project Director

| Barbara J Thomas
7081 Modesto Ave
Baton Rouge, LA 70 | | | EARNINGS | DESCRIPTION Fvri LAL Hours | HRS/UNITS | RATE TI | HIS PERIOD (\$)
208.34
1875.00 | YTD HOURS | YTD (\$,
625.02
5625.00 |
|--|---|--------------------|-------------|--|---------------|---------|--------------------------------------|---------------------|------------------------------------|
| Soc Sec #: xxx-xx-x
Home Department: | xxxx Employee ID: 11: 100 Staff Bi-weekly | | | Total Hours
Gross Earnings
Total Hrs Worke | d | | 2083.34 | | 6250.02 |
| Pay Period: 02/01/
Check Date: 02/15
NET PAY ALLOCA | /18 Check #: 6790 | | WITHHOLDING | Social Security Medicare | FILING STATUS | Tŀ | HIS PERIOD (\$)
129.17
30.21 | | <i>YTD (\$)</i>
387.50
90.63 |
| DESCRIPTION
Check Amount | THIS PERIOD (\$)
0.00 | YTD (\$) | | Fed Income Tax
LA Income Tax | M 1
S 0 1 | | 155.63
65.00 | | 505.53
195.00 |
| Chkg 0016
IET PAY | <u>1655.33</u>
1655.33 | 4927.36
4927.36 | DEDUCTIONS | TOTAL
DESCRIPTION | | TH | 380.01 | | 1178.66
YTD (\$) |
| _ | | | | STD Post-Tax | | | 147 | | |
| Silan | | | | TOTAL | | | | | |
| Stub 1 | 2083. | | | | | | | , 19 ()·1 , n | V4 + |
| Stuba | 2083. | 34 | | mage | | | | 7,085.2
11,418.6 | , , |
| J 1 4 CD 10 | 4146.1 | | % | 2- | (5.45) | | | F1. 1 | + % |
| | | | | 3760 | .00 | | 10 | (. / 3,753.0) | 1 + |
| | ×90 | 0/0 | | X | 7.65% | | 7' | f , 75 1 + 17 | |
| | < | | | | | | | 7.6 | 1 % |
| | 13,750. | 00 | | 11286 | . 88 | | 1 | (°61
2785 : 2 | } <u>*</u> |
| / | 7 | 4 | | <i>^</i> | 1 | | | | |
| / | | | | Ma | nt am | 1 | | | |
| man | + amt | | | 9 | * * * * | | | | |
| • | | i | NET PAY | | | THI | S PERIOD (\$) | | YTD (\$) |
| | | | | | | 1176 | 1655.33 | | 4927.36 |

0060 0060-7846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874

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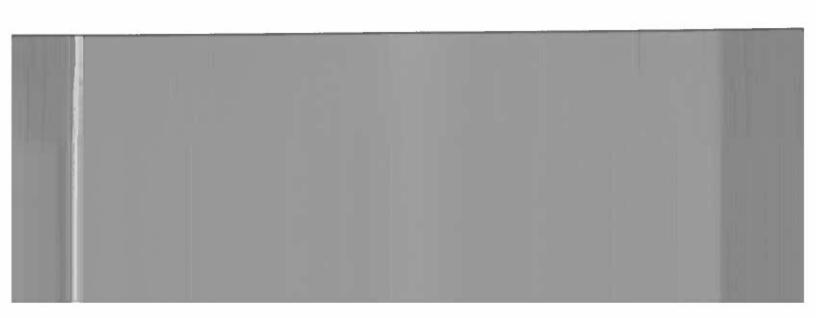
0060-T846 ORG1:100 Staff Bi-w eekly EE ID; 11 DD

BARBARA J THOMAS 7081 MODESTO AVE BATON ROUGE LA 70811 Project Director 90%

Stub 2

| | | - | NET PAY | | | THIS PERIOD (\$)
1655.34 | YTD (\$)
6582.70 |
|---------------------------------------|--------------------------|------------------|--------------|---|---------------|-----------------------------|---------------------|
| | | | | | | | |
| | | | | | Calc | in ation | is (|
| | | | 5 | see | Stu | b 1 f | |
| | | | | TOTAL | 7 | 48.00 | 192 00 |
| | | | | STD Post-Tax | - November | 48.00 | 192.00 |
| NET PAY | 1655.34 | 6582.70 | DEDUCTIONS | DESCRIPTION | | THIS PERIOD (\$) | YTD (\$) |
| Chkg 0016 | <u>1655.34</u> | 6582.70 | | TOTAL | | 380.00 | 1558.66 |
| DESCRIPTION Check Amount | THIS PERIOD (\$)
0.00 | YTD (\$)
0.00 | | LA Income Tax | S 0 1 | 65.00 | 661.16
260.00 |
| NET PAY ALLOC | | | | Medicare
Fed Income Tax | M 1 | 30.20
155.63 | 516.67
120.83 |
| Pay Period: 02/16
Check Date: 02/2 | | | WITHOLDINGS | Social Security | FILING STATUS | THIS PERIOD (\$) | YTD (\$) |
| Home Departmen | t: 100 Staff Bi-weekly | | WITHHOLDINGS | Gross Earnings Total Hrs Worker DESCRIPTION | | 2083.34 | 8333.36 |
| Soc Sec #: xxx-xx | -xxxx Employee ID: 11 | | | Total Hours | | | |
| 7081 Modesto Ave
Baton Rouge, LA | | | | Fvri
LAL Hours | | 208.34
1875.00 | 833.36
7500.00 |
| Barbara J Thomas | | ı | EARNINGS | DESCRIPTION | HRS/UNITS | RATE THIS PERIOD (\$) | YTD HOURS YTD (\$) |

0060 0060-T846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874



0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 5 DD

MICHAEL A FERRIS 17714 NINE OAKS AVE BATON ROUGE LA 70817 Project Administrator 80%

| 47 | | | | | | |
|---|--------------|--|---------------|--------------------------|--------------------------------|---------------------------|
| grant amt. | | J | | | | |
| Ź | | Gra | nt an | 77. | Fringe | + |
| \$ 2,333.34 | į | 7 | | í | 7+34 | % |
| X 80 % | | H 178. | 50 | Sal | ary 2, 18, 34 | + |
| 2916.68 | | X 7.6 | 5% | _ | 1,450,53
2,916,58
20,916 | †
X
% |
| Stub 2 1458.34 | 9 | +333. | 34 | | 1 • 15 1 • 3 4 |) |
| Stub 1 1458.34 | | | | | * ~ / } a a | |
| Salary: | 1 | SINCIP | , | | | |
| Chkg 1002 1199.39 3573.74 NET PAY 1199.39 3573.74 | | TOTAL | | 258.95 | | 801.28 |
| NET PAY ALLOCATIONS DESCRIPTION THIS PERIOD (\$) YTD (\$) Check Amount 0.00 0.00 0.00 | | Medicare
Fed Income Tax
LA Income Tax | M 0
S 0 0 | 21.15
101.38
46.00 | | 63.44
328.59
138.00 |
| Pay Period: 02/01/18 to 02/15/18
Check Date: 02/15/18 | WITHHOLDINGS | DESCRIPTION Social Security | FILING STATUS | THIS PERIOD (\$) 90.42 | | YTD (\$)
271.25 |
| Home Department: 100 Staff Bi-weekly | | Total Hours
Gross Earnings
Total Hrs Worke | | 1458.34 | | 4375.02 |
| 17714 Nine Oaks Ave
Baton Rouge, LA 70817
Soc Sec #: xxx-xx-xxxx Employee ID: 5 | | Fvri
LAL Hours | | 291.67
1166.67 | | 875.01
<u>3500.01</u> |
| PERSONAL AND CHECK INFORMATION Michael A Ferris | EARNINGS | DESCRIPTION | HRS/UNITS | RATE THIS PERIOD (\$) | YTD HOURS | YTD (\$) |

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 5 DD

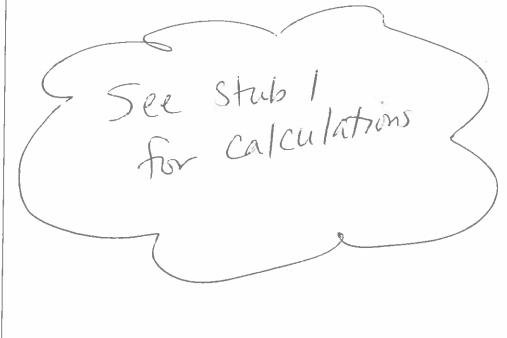
MICHAEL A FERRIS 17714 NINE OAKS AVE BATON ROUGE LA 70817 Project Administrator
80%

Stub 2

| Michael A Ferris | THE CRINFORMATIC | |
|--|--------------------------------|----------|
| 17714 Nine Oaks
Baton Rouge, LA | | |
| Soc Sec #: xxx-x | * * | 5 |
| Home Departmen | nt: 100 Staff Bi-weekly | |
| | | |
| Pay Period: 02/1 | 6/18 to 02/28/18 | |
| Pay Period: 02/1
Check Date: 02/2 | 6/18 to 02/28/18
28/18 | |
| Check Date: 02/2 | 28/18 Check #: 6795 | |
| Check Date: 02/2 | 28/18 Check #: 6795 | YTD (\$ |
| • | 28/18 Check #: 6795
CATIONS | YTD (\$) |
| Check Date: 02/2
NET PAY ALLOC
DESCRIPTION | 28/18 | |

DEPRONAL AND CHECK INCORMATION

| | | 1 | |
|------------------------------------|--|--|---|
| DESCRIPTION | HRS/UNITS | RATE THIS PERIOD (\$) | YTD HOURS YTD (\$) |
| Fvri | | 291,67 | 1166.68 |
| LAL Hours Total Hours | | <u>1166.67</u> | 4666.68 |
| Gross Earnings
Total Hrs Worker | d | 1458.34 | 5833.36 |
| DESCRIPTION | FILING STATUS | THIS PERIOD (\$) | YTD (\$) |
| Social Security | | 90.42 | 361.67 |
| Medicare | | 21.14 | 84.58 |
| Fed Income Tax | MO | 101,38 | 429.97 |
| LA Income Tax | S00 | 46.00 | 184.00 |
| TOTAL | | 258.94 | 1060.22 |
| | Fvri
LAL Hours
Total Hours
Gross Earnings
Total Hrs Worke
DESCRIPTION
Social Security
Medicare
Fed Income Tax
LA Income Tax | Fvri LAL Hours Total Hours Gross Earnings Total Hrs Worked DESCRIPTION FILING STATUS Social Security Medicare Fed Income Tax M 0 LA Income Tax S 0 0 | Fvri 291.67 LAL Hours 1166.67 Total Hours Gross Earnings 1458.34 Total Hrs Worked DESCRIPTION FILING STATUS THIS PERIOD (\$) Social Security 90.42 Medicare 21.14 Fed Income Tax M 0 101.38 LA Income Tax S 0 0 46.00 |



NET PAY

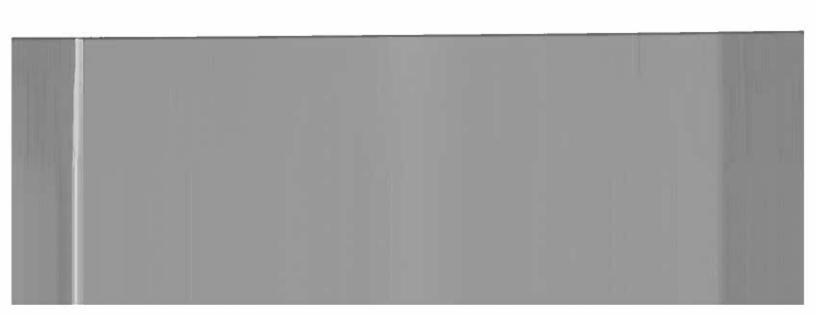
THIS PERIOD (\$)

1199.40

YTD (\$)

4773.14

0060 0060-T846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874



0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 37 DD

ALLISON DAVIS 17232 JEFFERSON HIGHWAY APT # 417 BATON ROUGE LA 70817

Education Specialist

Str. 6 2

| | | | | | | 一人ない」 | |
|-----------------------------|--------------------------|------------------|--------------|-----------------------------------|---------------|-------------------------------|-------------|
| PERSONAL AND (| CHECK INFORMATION | ı | EARNINGS | DESCRIPTION | HRS/UNITS | RATE THIS PERIOD (\$) YTD HOL | JRS YTD (\$ |
| 17232 Jefferson High | hway | | | Evri | | | 1041.6 |
| Apt # 417 | , | | | LAL Hours | | 1041.67 | 3125.0 |
| Baton Rouge, LA 70 | | | | Total Hours | | | |
| | xxxx Employee ID: 37 | | | Gross Earnings
Total Hrs Worke | | 1041.67 | 4166.6 |
| Home Department: | : 100 Staff Bi-weekly | | WITHHOLDINGS | DESCRIPTION | FILING STATUS | THIS PERIOD (\$) | YTD (\$ |
| Pay Period: 02/16/ | | | | Social Security | | 64.58 | 258.33 |
| Check Date: 02/28/ | /18 Check #: 6793 | | | Medicare | | 15.11 | 60.42 |
| NET PAY ALLOCA | TIONS | | | LA Income Tax | \$21 | 25.00 | 100.00 |
| DESCRIPTION
Check Amount | THIS PERIOD (\$)
0.00 | YTD (\$)
0.00 | | TOTAL | | 104.69 | 418.75 |
| Chkg 3799 | <u>911.01</u> | <u>3644.03</u> | DEDUCTIONS | DESCRIPTION | | THIS PERIOD (\$) | YTD (\$ |
| NET PAY | 911.01 | 3644.03 | | STD Post-Tax | | 25.97 | 103.88 |
| | | | | TOTAL | | 25:97 | 103.88 |
| | | | | See
For | Stub | alations | |
| | | | NET PAY | | | THIS PERIOD (\$) | YTD (|
| | | | .v. | | | 911.01 | 3644.0 |

0060 0060-T846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 4 DD

TALISHA DAVIS 3829 NORTH YOSEMITE DRIVE BATON ROUGE LA 70814

Compliance Coard.

Stub /

| | | | 5 | tub / | | |
|--|--------------|-------------------------------|--------------|------------------|------------------|---|
| PERSONAL AND CHECK INFORMATION Talisha Davis | EARNINGS | DESCRIPTION I | HRS/UNITS | RATE THIS PERIOD |) (\$) YTD HOURS | YTD (\$) |
| 3829 North Yosemite Drive | | Fvri | | 437 | 7.50 | 1312.50 |
| Baton Rouge, LA 70814 | | LAL Hours | | 1020 | 0.83 | 3062.50 |
| Soc Sec #: xxx-xx-xxxx Employee ID: 4 | | Total Hours
Gross Earnings | | 1458 | 2.22 | 407E 00 |
| Home Department: 100 Staff Bi-weekly | | Total Hrs Worked | | 1458 | 3.33 | 4375.00 |
| Pay Period: 02/01/18 to 02/15/18
Check Date: 02/15/18 | WITHHOLDINGS | | TLING STATUS | THIS PERIOD | 1-7 | YTD (\$) |
| NET PAY ALLOCATIONS | | Social Security Medicare | | |).42
I.15 | 271.25
63.44 |
| | | | M 2 | | 3.13 | 202.30 |
| DESCRIPTION THIS PERIOD (\$) YTD (\$) Check Amount 0.00 0.00 | | LA Income Tax | VI 0 2 | 30 | 0.00 | 90.00 |
| Chkg 0014 <u>1154.34</u> <u>3450.14</u> | | TOTAL | | 204 | 1.70 | 626.99 |
| NET PAY 1154.34 3450.14 | DEDUCTIONS | DESCRIPTION | | THIS PERIOD | (\$) | YTD (\$) |
| | | STD Post-Tax | | 99 | 0.29 | 297.87 |
| Sala | | TOTAL | | 99 | 1.29 | 297.87 |
| Salary. | | | | | | |
| 1 11/-0 27 | | | ,* | | to the first | 7. |
| Ship 1: 1458.33 | = | Mag | 0 | | | |
| () (U) | | 1 1 1 (6) | | _ | 1 - 458 - 1 | 1 F |
| Stub 2! 1458.34 | - | | | | 7,0563.5 | 1 + |
| 71m 2. 1420.01 | | mil | 117 | | 2,074.6 | 7 x |
| | | 104 | 1.6/ | | 70 | - % |
| 2611 17 | | • | | <i>8</i> 7 | 2,041-6 | 7 + |
| 2916.67 | | 1 | 7 69 | 2/2 | | |
| - (0 | | X | 1.02 | | Solary Bullia | 7 × |
| X 70% | | | | | |) () () () () () () () () () (|
| | | 015 | 7 19 | | | 5 % |
| 2041.61 | | A 15 | (a 1/ | | 159-1 | 19. + |
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| Chart ant | | 4 | yr will | amt. | 65 | |
| y | NET PAY | | | THIS PERIOD (| (\$) | YTD (\$) |
| | | • | | 1154. | | 3450.14 |
| Proposition Disputation and | | | <u>'</u> | | 1 | |

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 4 DD

TALISHA DAVIS 3829 NORTH YOSEMITE DRIVE BATON ROUGE LA 70814

Compliance Coord.

| | | | | Stub | 2 |
|---|--------------|-----------------------------------|---------------|-----------------------------|---------------------|
| PERSONAL AND CHECK INFORMATION Talisha Davis | EARNINGS | DESCRIPTION | HRS/UNITS | RATE THIS PERIOD (\$) | YTD HOURS YTD (\$) |
| 3829 North Yosemite Drive | | Evri | | 437.50 | 1750.00 |
| Baton Rouge, LA 70814 | | LAL Hours | | 1020.84 | 4083.34 |
| Soc Sec #: xxx-xx-xxxx Employee ID: 4 | | Total Hours | | 1020101 | 1000.04 |
| Home Department: 100 Staff Bi-weekly | | Gross Earnings
Total Hrs Worke | | 1458.34 | 5833.34 |
| Pay Period: 02/16/18 to 02/28/18 | WITHHOLDINGS | DESCRIPTION | FILING STATUS | THIS PERIOD (\$) | YTD (\$) |
| Check Date: 02/28/18 | | Social Security | | 90.42 | 361.67 |
| NET PAY ALLOCATIONS | | Medicare | | 21.14 | 301.07
84.58 |
| HEI PAT RELOCATIONS | | Fed Income Tax | M 2 | 63.13 | 265.43 |
| DESCRIPTION THIS PERIOD (\$) YTD (\$) | | LA Income Tax | M 0 2 | 30.00 | 205.43
120.00 |
| Check Amount 0.00 0.00 | | DA Income Tax | MUZ | | 120.00 |
| Chkg 0014 <u>1154.36</u> <u>4604.50</u>
NET PAY 1154.36 4604.50 | DEDUCTIONS | TOTAL DESCRIPTION | | 204.69 | 831.68 |
| | DEDUCTIONS | | | THIS PERIOD (\$) | YTD (\$) |
| | | STD Post-Tax | | 99.29 | 397.16 |
| | | TOTAL | | 99.29 | 397.16 |
| | | see for | cali | culations | |
| | NET PAY | | | THIS PERIOD (\$)
1154.36 | YTD (\$)
4604.50 |

0060 0060-T846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 35 DD

PATRICIA A BROWN 6555 E MONARCH BATON ROUGE LA 70812 Data Entry 100%

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|------------------------------------|--|---|--|--|
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F | 159.37 + | |
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7+65 % | |
| 2083.3 | 33 | | 1.5741-16 + | |
| Fringe | 1 | | | |
| TOTAL | | 36.72 | | 110,16 |
| STD Post-Tax | | 36.72 | | 110.16 |
| | | THIS PERIOD (\$) | | 569.81
YTD (\$) |
| | 301 | 26.00 | | 78.00 |
| Medicare | S 1 | 15.10 | | 193.75
45.31
252.75 |
| | FILING STATUS | THIS PERIOD (\$) | | YTD (\$) |
| Gross Earnings
Total Hrs Worked | | 1041 66 | | 3124 99 |
| Fvri
LAL Hours | | 1041.66 | | 1041.66
2083.33 |
| GS DESCRIPTION I | HRS/UNITS RATE | THIS PERIOD (\$) | YTD HOURS | YTD (\$) |
| | Fvri LAL Hours Total Hours Gross Earnings Total Hrs Worked LDINGS DESCRIPTION Social Security Medicare Fed Income Tax LA Income Tax STOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL | Fvri LAL Hours Total Hours Gross Earnings Total Hrs Worked LDINGS DESCRIPTION FILING STATUS Social Security Medicare Fed Income Tax S 1 LA Income Tax S 0 1 TOTAL TOTAL | Fvri LAL Hours Total Hours Gross Earnings Total Hrs Worked LDINGS DESCRIPTION FILING STATUS Social Security Medicare Fed Income Tax S 1 LA Income Tax S 0 1 TOTAL TOT | Firi LAL Hours Total Hours Gross Earnings Total Hrs Worked LDINGS DESCRIPTION FILING STATUS Medicare Fed Income Tax S 0 1 26.00 TOTAL TOT |

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 35

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PATRICIA A BROWN 6555 E MONARCH BATON ROUGE LA 70812 Data Entry 100%

| | for | | |
|---|--|----------------------------------|---------------------|
| | See St | ub 1
calculations | 146.88 |
| | STD Post-Tax | 36.72 | 146.88 |
| Chkg 0017 821.45 3266.47 NET PAY 821.45 3266.47 DEDUCTION DEDUCTION | TOTAL TIONS DESCRIPTION | 183.50
THIS PERIOD (\$) | 753.31
YTD (\$) |
| DESCRIPTION THIS PERIOD (\$) YTD (\$) Check Amount 0.00 0.00 | Fed Income Tax S 1
LA Income Tax S 0 1 | 77.81
26.00 | 330.56
104.00 |
| Pay Period: 02/16/18 to 02/28/18 Check Date: 02/28/18 | Social Security Medicare | 64.58
15.11 | 258.33
60.42 |
| Home Department: 100 Staff Bi-weekly | Gross Earnings Total Hrs Worked IOLDINGS DESCRIPTION FILING | 1041.67 STATUS THIS PERIOD (\$) | 4166.66
YTD (\$) |
| 6555 E Monarch Baton Rouge, LA 70812 Soc Sec #: xxx-xx-xxxx Employee ID: 35 | Fyri
LAL Hours
Total Hours | 1041.67 | 1041.66
3125.00 |
| PERSONAL AND CHECK INFORMATION Patricia A Brown | NGS DESCRIPTION HRS/U | INITS RATE THIS PERIOD (\$) Y | TD HOURS YTD (\$) |

0060 0060-7846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874



0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 12 DD

SHIRLEY WALKER 6230 MAPLEWOOD DRIVE **BATON ROUGE LA 70812**

Client Services Coord.

| | | | | | | Stu | 10/ | | |
|---|------------------|--------------------|--------------|---------------------------------|---------------|---------------|------------------|--------------------|---------------------|
| PERSONAL AND CHECK I
Shirley Walker | INFORMATION | | EARNINGS | DESCRIPTION | HRS/UNITS | RATE THIS PER | RIOD (\$) | YTD HOURS | YTD (\$) |
| 6230 Maplewood Drive
Baton Rouge, LA 70812 | | | | LAL Hours
Total Hours | | 1 | 041.66 | | 3124.99 |
| | mployee ID: 12 | | 1 | Gross Earnings Total Hrs Worker | | 1 | 041.66 | | 3124.99 |
| Home Department: 100 State | ff Bi-weekly | | WITHHOLDINGS | DESCRIPTION | FILING STATUS | THIS PER | 11OD (\$) | | YTD (\$) |
| Pay Period: 02/01/18 to 02/ | | | | Social Security | | | 64.58 | | 193.75 |
| Check Date: 02/15/18 CI | heck #: 6791 | | | Medicare
Fed Income Tax | S 1 +\$21.20 | | 15.10
99.01 | | 45.31
316.35 |
| | ERIOD (\$) | YTD (\$) | | LA Income Tax | S 0 1 | | 26.00 | | 78.00 |
| Check Amount | 0.00 | 0.00 | | TOTAL | | | 204.69 | | 633.41 |
| Chkg 2191
NET PAY | 823.95
823.95 | 2452.52
2452.52 | DEDUCTIONS | DESCRIPTION | | THIS PER | 100 (\$) | | YTD (\$) |
| | | | | STD Post-Tax | | | 13.02 | | 39.06 |
| | 6 | | | TOTAL | | | 13.02 | | 39.06 |
| Salary | | | | | | 12 | | | |
| | | | + | _ ` | 1 | | | | |
| Stubl: | 1001 | 1.6 | [| nnge | , | | | | |
| | 104 | 1.66 | | | | | | | |
| Stuba: | 100 | 67 | | | | | | | |
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| | | | NET PAY | | | THIS PERI | 20 (\$)
23.95 | | YTD (\$)
2452.52 |
| | | | | | | 0 | 23.33 | | 2402.02 |

0060-T846 ORG1:100 Staff Bi-w eekly EE ID: 12

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SHIRLEY WALKER 6230 MAPLEWOOD DRIVE BATON ROUGE LA 70812

Client Services. Coord.

| | | | | | | | Stub | 2 | |
|--|-------------------|--------------------|--------------|------------------------------------|---------------|------|---------------------------|-----------|----------------------------|
| Shirley Walker | CHECK INFORMATION | | EARNINGS | DESCRIPTION | HRS/UNITS | RATE | THIS PERIOD (\$) | YTD HOURS | YTD (\$) |
| 6230 Maplewood Dri
Baton Rouge, LA 70 | 0812 | | | LAL Hours Total Hours | | | <u>1041.67</u> | | <u>4166.66</u> |
| Soc Sec #: xxx-xx-x Home Department: | , , | | | Gross Earnings
Total Hrs Worked | 1 | | 1041.67 | | 4166.66 |
| Pay Period: 02/16/ | • | | WITHHOLDINGS | DESCRIPTION | FILING STATUS | | THIS PERIOD (\$) | | YTD (\$) |
| Check Date: 02/28/ | | | | Social Security
Medicare | | | 64.58 | | 258.33 |
| NET PAY ALLOCA | | | | Fed Income Tax | S 1 +\$21.20 | | 15.11
99.01 | | 60.42 |
| | AN 990 | | | LA Income Tax | S 0 1 | | 26.00 | | 415.36
104.00 |
| DESCRIPTION | THIS PERIOD (\$) | YTD (\$) | | | . | | 20.00 | | 104.00 |
| Check Amount | 0.00 | 0.00 | | TOTAL | | | 204.70 | | 838.11 |
| Chkg 2191
NET PAY | 823.95
823.95 | 3276.47
3276.47 | DEDUCTIONS | DESCRIPTION | | | THIS PERIOD (\$) | | YTD (\$) |
| | 020.00 | 02.0.41 | | STD Post-Tax | | | 13.02 | | 52.08 |
| | | | | TOTAL | | | 13.02 | _ | 52.08 |
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| | | | NET PAY | | | TI | HIS PERIOD (\$)
823.95 | | YTD (\$)
3276.47 |

0060 0060-7846 Family Values Resource Institute Inc • Institute Inc • Po Box 77403 • Baton Rouge LA 70874





INVOICE

INVOICE #:

201802

2/1/2018

INVOICE DATE:

225-355-2725 Office 225-355-2742 Fax www. FVRLorg

P.O. Box 74403

Baton Rouge, LA 70874

Billed To: Louisiana Alliance For Life

| DESCRIPTION | AMOUNT |
|--|-------------------|
| Monthly Charge for Rental of 2,000 square feet of office space in 2500 square foot building at \$0.60 per square foot as stated in the budget narrative. | 1,200.00 |
| Rent 1890 + Copier lease 16.90 + Telephone - 290.00 + Total Client Onlive - 1/1.00 + Total Client Onlive - 1/1.00 + Mainternet Janton Janton + Electronic Payort 1,97/1.00 + Total 1.00 - 10 + Tota | |
| | TOTAL \$ 1,200.00 |



🎁 Hancock 🖣 Whitney

Transactions Details

Posting Date 03/12/2018

Transaction Date 03/12/2018

Description DDA CHECK 0000001608

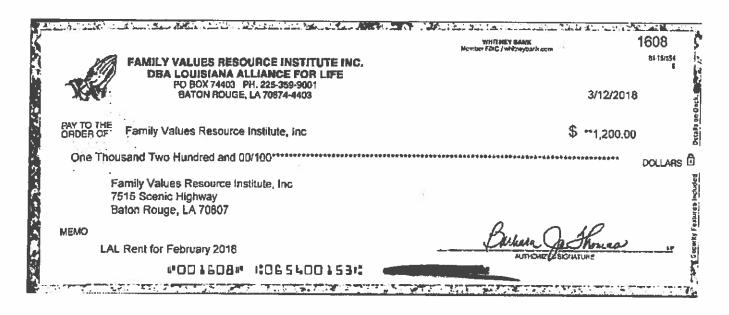
Transaction Type Debit

T/C 0075

Amount \$1,200.00

Balance

Front Back



https://secure.hancockwhitney.com/dBanking/home.do

3/14/2018



🆚 Hancock 🖣 Whitney

Transactions Details

Posting Date

03/12/2018

Transaction Date

03/12/2018

Description

DDA CHECK 0000001608

Transaction Type

Debit

T/C

0075

Amount

\$1,200.00

Balance

Front

Back

931218 - 97090001558436 - 206559368 (<



https://secure.hancockwhitney.com/dBanking/home.do

3/14/2018

Stage 113.45

ISTROUMA 5200 LONGFELLOW DR BATON ROUGE LA 70805-2711 2106300966

02/15/2018 (800)275-8777 1:04 PM ------

Product Sale Final Qty Price Description

PM 1-Day (Domestic) \$7.25 1 (BATON ROUGE, LA 70804) (Weight:1 Lb 5.50 Oz) (Expected Delivery Date) (Friday 02/16/2018) Certified 1 \$3.45

(@@USPS Centified Mail #) (70171450000032253198)

\$2.75 Return 1

Receipt

(@@USPS Return Receipt #) (9590940216096053111946)

Total

\$13.45

Debit Card Remit'd \$1 (Card Name:Debit Card) (Account #:XXXXXXXXXXXXXX9477) \$13.45 (Approval #: (Transaction #:675) (Receipt #:005231) (Debit Card Purchase:\$13.45) (Cash Back: \$0.00)

Includes up to \$50 insurance

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit USPS.com USPS Tracking or call 1-800-222-1811.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to https://www.usps.com/help/claims.htm.

All sales final on stamps and postage Refunds for guaranteed services only Thank you for your business

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RESENT

Go to: https://postalexperience.com/Pos **84**0-5700-0284-001-00008-66339-02

> or scan this code with your mobile device:



or call 1-800-410-7420. YOUR OPINION COUNTS



DE LAGE LANDEN FINANCIAL SERVICES, INC. PHILADELPHIA, PA 19101-1602

REMITTANCE SECTION

Invoice Number: Due Date: Due This Period:

58145791 03/01/2018 \$218.98

Amount Enclosed:

Copier

DE LAGE LANDEN FINANCIAL SERVICES, INC.

PO BOX 41602 PHILADELPHIA, PA 19101-1602

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2038055279 PRESORT 55279 1 AB 0.405 P1C214 րեկիլիակերիկարկերույիրությանում և և և FAMILY VALUES RESOURCE INSTITUTE INC

ATTN AP PO BOX 74403 **BATON ROUGE LA 70874-4403**

2100000581457910000218981

Detach here. Please include the top payment coupon with your payment. Please allow 5-7 days for U.S. Postal Service delivery.

DE LAGE LANDEN FINANCIAL SERVICES, INC. PO BOX 41602 PHILADELPHIA, PA 19101-1602

800-736-0220

Contract Number: Invoice Number:

Account Number: Site Number:

Invoice Date: Period of Performance: **Due This Period:**

25411981 58145791 1053937

> 3849724 02/10/2018

02/01/2018-02/28/2018 \$218.98

Visit www.lesseedirect.com

Did you know you can...

- ✓ View copies of your contract and open invoices
- ✓ Enroll in paperless invoicing
- Make a payment
- ✓ Set up automated/recurring payments

IMPORTANT MESSAGES

*Please review your equipment location(s) for tax purposes.

See Reverse For Important Information

| Billed this Invoice Balance Due Previous Invoices Total Amount Due | \$199.07 | 919.91 | 7210.30 | \$0.00 | \$0.00
\$218.98 |
|--|---------------------------|---------|---------------------------|-------------------------|------------------------|
| | \$199.07 | \$19.91 | \$218.98 | \$0.00 | \$218.98 |
| INSURANCE | \$20.07 | \$2.01 | \$22.08 | \$0.00 | \$22.08 |
| PAYMENT | Amount
\$179.00 | \$17.90 | Amount
\$196.90 | Amount
\$0.00 | Amount Due
\$196.90 |
| Description | Payment | Tax | Total | Applied | Remaining |

(Please see the following pages for details.)

| ASSET | DETAIL | .S |
|--------------|--------|----|
|--------------|--------|----|

Contract Serial **Purchase** Number Number A7PY01100010

Make / Asset Model Number KONMIN / 25411981_1

install Date

Cost Center

Department

Payment Amount \$179.00

Tax \$17.90

Amount \$196.90

Total

Asset Location: 7515 SCENIC HWY BATON ROUGE EAST BATON ROUGE LA 70807-5447 United States

Asset Amount Total:

\$196.90

JPNIORGAN CHASE & CO.

Post date: Amount: PAY TO THE ORDER OF De Lage Landen Financial Services, Inc. MEMO FAMILY VALUES RESOURCE INSTITUTE, INC
Serving fermand for One 20 Years
P.O. BATT 74403
BATTON ROUGE, DA 70407
2751398 (1) Two Hundred Eighteen and 98/100****** De Lage Landen Financial Services, Inc PO Box 41602 Philadelphia, PA 19101-1602 #005003# #0654001374 \$ 218.98 03/02/2018 CHASE O \$ "218.98 1/28/2018 DOLLARS 5003 Check Number: Account: -5003

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(NOT FOR PAYMENTS) DEPARTMENT # 102430 PO BOX 1259 **OAKS, PA 19456** 6400 0210 NO RP 05 02062018 NNNNNNNY 01 000916 0004



FAMILY VALUES RESOURCE INSTITUTE INC 7515 SCENIC HWY **BATON ROUGE LA 70807-5447**

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| ACCOUNT SUMMARY as of I | Feb 5, 2018 |
|----------------------------------|-------------|
| Previous Balance | \$702.83 |
| Payment Received - Jan 29 | -\$572.83 |
| Service Call Jan 22 | -\$143.00 |
| Remaining Previous Balance | -\$13.00 |
| New Charges: Feb 5, 2018 - Mar 4 | , 2018 |
| ₩ TV | \$79.99 |
| nternet | \$115.00 |
| Telephone | \$264.75 |
| Cox Toll Free | \$5.00 |
| Usage Charges(Phone) | \$0.41 |
| Taxes, Fees and Surcharges | - \$81.08 |
| New Charges | \$546.23 |
| Total Due By Feb 27, 2018 | \$533.23 |

February 05, 2018

D www.coxbusiness.com **CONTACT US:**

866-272-5777

Account Number COX PIN

001 5711 071045903

7515 SERVICE ADDRESS

7515 SCENIC HWY

BATON ROUGE, LA 70807-5447

Telephone \$25000 Internet \$75.00



Make Your Life Easier and GO GREEN! Wate Your Life Easter and Go Green!
With EasyPay, pay your monthly Cox bill automatically from your bank or credit card account. Add Paperless Billing and you get rid of paper bills and can access your account online any time, all while saving trees! Sign up today at www.coxbusiness.com/myaccount! February 05, 2018 bill for FAMILY VALUES RESOURCE INSTITUTE

Account Number 001 5711 071045903 Service at

7515 SCENIC HWY

BATON ROUGE, LA 70807-5447

2.

Total Due By Feb 27, 2018

\$533.23

COX BUSINESS PO BOX 919243 DALLAS TX 75391-9243

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05711001182071045903020053323



0400 0410 190 10 00 02000000000000 2019 BILL FOR FAMILY VALUES

1

| February 05, 2018 Bill for FAMILT VALUES |
|--|
| RESOURCE INSTITUTE |
| Account number 001 5711 071045903 |
| Page 2 of 6 |
| |

| | | 225-356-1101 | |
|------------------------------------|----------|------------------------------------|---------|
| MONTHLY SERVICES Feb 5 - Mar 4 | | VoiceManager Flat Rated Local Line | 25.00 ` |
| | | Network Interface Fee - Multi-Line | 9.25 |
| TV | \$1,99 | Cox Business Unlimited | 5.00 |
| Digital Adapter | 20.00 | DIRECTORY LISTING-NON | 0.00 |
| Cox Business TV Starter (qty 2) | | PUBLISHED | |
| Business TV Essential (qty 2) | 38.00 | VoiceManager Office Package | 0.00 |
| Cox Business Advanced TV | 4.00 | 225-357-6822 | |
| Business TV DVR/HD Advanced | 8.50 | VoiceManager Flat Rated Local Line | 25.00 |
| Receiver | | Network Interface Fee - Multi-Line | 9.25 |
| | | Cox Business Unlimited | 5.00 |
| Other Fees and Surcharges | \$3.50 | DIRECTORY LISTING-NON | 0.00 |
| Regional Sports Surcharge | 4.00 | PUBLISHED | |
| Broadcast Surcharge | \$79.99 | VoiceManager Office Package | 0.00 |
| Total TV | 4,3.33 | 225-357-6880 | £. |
| ANGERALTY | | VoiceManager Flat Rated Local Line | 25.00 |
| INTERNET | \$115.00 | Network Interface Fee - Multi-Line | 9.25 |
| CBI 100 - 100 Mbps x 20 Mbps | \$115.00 | Cox Business Unlimited | 5.00 |
| Total Internet | | DIRECTORY LISTING-NON | 0.00 |
| TELEPHONE | | PUBLISHED | |
| 225-355-2725 | | VoiceManager Office Package | 0.00 |
| VoiceManager Flat Rated Local Line | \$25.00 | 225-359-9001 | |
| Network Interface Fee - Multi-Line | 9.25 | VoiceManager Flat Rated Local Line | 25.00 |
| Cox Business Unlimited | 5.00 | Network Interface Fee - Multi-Line | 9.25 |
| Business VoiceManager Group | 0.00 | Cox Business Unlimited | 5.00 |
| Hunting | | DIRECTORY LISTING-NON | 0.00 |
| Individual Voice Mailbox | 0.00 | PUBLISHED | 0.00 |
| VoiceManager Office Package | 0.00 | VoiceManager Office Package | 0.00 |
| 225-355-2333 | | 225-355-2742 | 45.00 |
| VoiceManager Flat Rated Local Line | 25.00 | VoiceManager Flat Rated Local Line | 15.00 |
| Network Interface Fee - Multi-Line | 9.25 | Network Interface Fee - Multi-Line | 9.25 |
| Cox Business Unlimited | 5.00 | Cox Business Unlimited | 5.00 |
| DIRECTORY LISTING-NON | 0.00 | DIRECTORY LISTING-NON | 0.00 |
| PUBLISHED | | PUBLISHED | |
| VoiceManager Office Package | 0.00 | | |
| <u> </u> | | | |

Monthly Services cont.

Payment options

Online: Visit cox.com to register for 24-hour online access or make

payments to your account.

Mail: Detach this coupon and send it with your check or money order. Please include your account number on your check. Make your checks payable to Cox Communications. Allow 7 days for processing.

Phone: You may contact us at the telephone number listed on the front of this bill payable and follow the phone are supported by the bill payable and follow the phone are supported by the bill payable and follow the phone are supported by the bill payable and follow the phone are supported by the

front of this bill anytime and follow the phone prompts to make a payment using your bank account or credit card.

In Person: Visit www.cox.com/business for a list of Cox Authorized Payment Centers.



2:

| VoiceManager Utility Line | 0.0 |
|--|----------|
| Total Telephone | \$264.7 |
| COX TOLL FREE | |
| 855-696-2333 | |
| Cox Toll Free Svc - Switched | \$5.00 |
| Total Cox Toll Free | \$5.00 |
| TOTAL MONTHLY SERVICES | \$464.74 |
| USAGE CHARGES | |
| Telephone Usage | |
| Usage for 225-355-2725 | |
| Intrastate Long Distance (qty 3) | \$0.00 |
| Interstate Cox LD - CB | 0.00 |
| Usage for 225-356-1101 | |
| Intrastate Long Distance | 0.00 |
| Interstate Cox LD - CB | 0.00 |
| Usage for 225-357-6822 | |
| Interstate Cox LD - CB | 0.00 |
| Usage for 225-357-6880 | |
| Intrastate Long Distance (qty 2) | 0.00 |
| Interstate Cox LD - CB | 0.00 |
| Usage for 225-359-9001 | |
| Intrastate Long Distance (qty 7) | 0.00 |
| Interstate Cox LD - CB (qty 2) | 0.00 |
| Usage for 225-355-2742 | |
| Intrastate Long Distance | 0.00 |
| Interstate Cox LD - CB (qty 2) | 0.00 |
| Total Telephone Usage | \$0.00 |
| Toli Free Usage | |
| Usage for 855-696-2333 | |
| Interstate Toll Free - CB | \$0.03 |
| Intrastate Toll Free - CB (qty 4) | 0.38 |
| Total Toll Free Usage | \$0.41 |
| TOTAL USAGE CHARGES | \$0.41 |
| TAXES, FEES AND SURCHARGES | |
| TV and/or Internet Taxes and Fees
FCC Fee | \$0.08 |
| Franchise Fee | 4.38 |
| PEG Access Fee | 0.46 |
| Total TV and/or Internet Taxes and Fees | \$4.92 |
| Telephone Taxes, Fees and Surcharges | |
| Federal Excise Tax | \$7.55 |
| Interstate Telecomm Services | 0.16 |
| E-911 Tax (Commercial) | 10.50 |
| State Sales Tax | 10.74 |
| Total Taxes | \$28.95 |
| Fees and Surcharges | |
| | |

| 19.39
\$47.21
\$76.16
\$81.08 |
|--|
| \$47.21
\$76.16 |
| \$47.21 |
| |
| 19.39 |
| |
| 4.88 |
| 0.67 |
| 0.28 |
| 11.99 |
| |

| TELEPHONE USAGE DETAILS for 225-355-2725 | | | | | | |
|--|----------------------|----------------|---------|-------|--------|--|
| Intrast | ate Long Distanc | ce | | | | |
| | | | Min: | Rate/ | | |
| Time | Place | Number | Sec | Time | Amt | |
| lan 5 | | | | | | |
| • | ALEXANDRI ,LA | 318-314-3066 | :48 | DD/D | 0.0000 | |
| lan 10 | , | | | | | |
| 08:33A | THIBODAUX,LA | 985-446-5004 | 1:18 | DD/D | 0.0000 | |
| 11:01A | MONROE ,LA | 318-605-7636 | 1:12 | DD/D | 0.0000 | |
| Total In | trastate Long Dista | nce | 3:18 | | \$0.00 | |
| Interst | ate Long Distanc | e | | | | |
| | _ | | Min: | Rate/ | | |
| Time | Place | Number | Sec | Time | Amt | |
| lan 19 | | | | | | |
| , | MILWAUKEE,WI | 414-856-1911 | :42_ | DD/D | 0.0000 | |
| Total Int | terstate Long Dista | nce | :42 | | \$0.00 | |
| | | | | | | |
| TELEDI | HONE USAGE D | ETAILS for 225 | 256.41 | 01 | | |
| *C 107 | | | -550-11 | | | |
| Intrast | ate Long Distanc | e | | | | |
| | | | Min: | Rate/ | | |
| Time | Place | Number | Sec | Time | Amt | |
| Jan 9 | | | | | | |
| 12:48P | ALEXANDRI ,LA | 318-314-3064 | :36 | DD/D | 0.0000 | |
| Total Int | rastate Long Dista | nce | :36 | | \$0.00 | |
| | | | | | | |
| Intersta | ate Long Distanc | e | | D-4-1 | | |
| | | | Min: | Rate/ | _ | |
| Time | Place | Number | Sec | Time | Amt | |
| Jan 5 | | | 4.00 | DD (D | 0.0000 | |
| | SANBARBAR,CA | 805-456-5135 | 1:00 | DD/D | 0.0000 | |
| Total Int. | erstate I ong Distal | nce | 1:00 | | \$0.00 | |

| TELEPI | HONE US | AGE D | ETAILS for 225 | -357-6 | 322 | |
|----------------|------------|----------|----------------|----------|-------|--------|
| Interst | ate Long I | Distan | ce | | | |
| | | | | Min: | Rate/ | |
| Time
Jan 31 | Place | | Number | Sec
? | Time | Amt |
| | FOREST | ,IL | 708-834-3639 | :30 | DD/D | 0.0000 |
| Total Int | erstate Lo | ng Dista | nce | :30 | | \$0.00 |

| 1 | Intrastate Long Distance | | | | | | |
|---|---------------------------|--------------|--------------|-------------|---------------|--------|--|
| | Time | Place | Number | Min:
Sec | Rate/
Time | Amt | |
| | Jan 9
10:46A
Jan 22 | NEWORLEA ,LA | 504-605-9206 | :06 | DD/D | 0.0000 | |

February 05, 2018 Bill for FAMILY VALUES RESOURCE INSTITUTE Account number 001 5711 071045903 Page 4 of 6

| Telepho | ne Usage
NEWORLE | Detail
A LA | s cont.
504-605-9206 | :06 | DD/D_ | 0.0000 |
|-----------|--------------------------------|----------------|-------------------------|------|-------|--------|
| Total Int | Total Intrastate Long Distance | | | | | \$0.00 |
| Intersta | Interstate Long Distance | | | | Rate/ | |
| Time | Place | | Number | Sec | Time | Amt |
| | FOREST | ,IL | 708-834-3639 | | DD/D | 0.0000 |
| Total Int | erstate Lo | ng Dista | nce | 1:12 | | \$U.UU |

| WELFBUONE | HEAGE | DETAILS | for 225 |)-35 9 -3001 |
|-----------|-------|---------|---------|---------------------|
| TELEPHONE | OSMOL | D.C.L. | | - |

| | | = : | | | | |
|---|-------------------------------------|---|--|---------------------|----------------------|----------------------------|
| | Intrasta | te Long Distance | Min: | Rate/ | | |
| | Time | Place | Number | Sec | Time | Amt |
| | jan 8
09:41A
09:42A
01:23P | STFRNCISVL,LA
STFRNCISVL,LA
STFRNCISVL,LA | 225-635-5486
225-635-5422
225-635-5486 | :18
::12
3:18 | DD/D
DD/D
DD/D | 0.0000
0.0000
0.0000 |
| | Jan 10
01:31P | NEWORLEA ,LA | 504-563-1717 | 1:54 | DD/D | 0.0000 |
| | Jan 23
10:41A
11:29A | NEWORLEA ,LA
NEWORLEA ,LA | 504-452-4185
504-210-5728 | 1:00
:42 | DD/D
DD/D | 0.0000 |
| | Jan 29
01:51P_ | NEWORLEA ,LA | 504-210-5728 | :42 | DD/D | 0.0000 |
| | Total int | rastate Long Distar | ıce | 8:06 | | \$0.00 |
| | Interstate Long Distance | | | | Rate/ | |
| | Time | Place | Number | Sec | Time | Amt |
| | | OKLD ALMD,CA | 510-239-5169 | :24 | DD/D | 0.0000 |
| | Jan 29
01:54P | PENSACOLA,FL | 850-516-7726 | | DD/D | 0.0000 |
| • | | erstate Long Dista | 1:06 | • | \$0.00 | |

TELEPHONE USAGE DETAILS for 225-355-2742 Intrastate Long Distance

| 11101000 | | | Min: | Rate/ | |
|----------|--------------------|--------------|------|-------|--------|
| Time | Place | Number | Sec | Time | Amt |
| Jan 31 | PONCHATO LA | 985-386-2537 | 1:18 | DD/D | 0.0000 |
| | rastate Long Dista | nce | 1:18 | 1 | \$0.00 |

Interstate Long Distance Min: Rate/ Amt Time Sec Number Time Place Jan 19 0.0000 918-526-1442 1:54 DD/D .OK 08:08A TULSA Jan 30 0.0000 3:00 DD/D 412-387-1348 01:53P ELIZABETH ,PA 4:54 Total Interstate Long Distance

TELEPHONE USAGE DETAILS for 855-696-2333

Interstate Toll Free

| Interst | ate Toll Fre | e | From | Min: | Rate/ | |
|---------|--------------|------|---------------|------|-------|--------|
| Time | Place | | Number | Sec | Time | Amt |
| Jan 18 | BLUFFTON | ,sc | 843-706-7940_ | :30 | DD/D | 0.0250 |
| | erstate Toil | Free | | :30 | | \$0.03 |
| Intrast | ate Toll Fre | e | From | Min: | Rate/ | |
| Time | Place | | Number | Sec | Time | Amt |

Telephone Usage Details cont.

| Total Intrastate Toli Free | | 7:36 | 49.50 |
|-------------------------------|--------------|-----------|----------|
| 08:56A BATONROUG,LA | 223-321-33-3 | 7.76 | \$0.38 |
| Jan 24 | 225-921-5921 | 3:48 DD/D | 0.1900 |
| Jan 17
05:30P BATONROUG,LA | 225-892-7626 | 1:18 DD/E | 0.0650 |
| Jan 16
12:24P BATONROUG,LA | 225-603-3318 | 2:00 DD/D | 0.1000 |
| Jan 9
12:16A BATONROUG,LA | 225-892-7626 | :30 DD/N | 0.0250 - |
| 1 0 | | | |

Rate Codes

DD = Direct Dial

| Time Codes | E - Evening |
|-------------------|-------------|
| D = Day | E = Evening |
| N = Night/Weekend | |

NEWS FROM COX

At Cox Business it's our priority to continue to add value with increasing Internet speeds, enhanced features and additional programming. To support these investments in improving our services, we are making changes to our rates. The new rates will be effective sixty (60) days after this notification. If you have questions, please call the service number provided on the invoice.

The monthly recurring charge for each of your digital television adapters will increase from \$1.99 to \$2.99 on April 1, 2018. To keep you better informed of the costs associated with the delivery of regional sports programming, on April 1, 2018 the Regional Sports Surcharge will increase from \$3.50 to \$5.00. Effective April 1, 2018, the Broadcast Surcharge will increase from \$4.00 to \$7.50.

CUSTOMER INFORMATION

Billing, Payment Policies and Fees

Cox Business bilis all customers in advance for monthly recurring charges cox business bits all customers in advance for informity recurring charges and in arrears for non-recurring charges such as On Demand/pay-per-view and long distance. Payment in full is due to Cox by the "Due By" date indicated on your statement. If payment is not received by this date, your bill will become past due and may be subject to additional fees, such as late payment charges, electronic reactivation fees, or returned payment fees. Payment of your Cox bill confirms your subscription to services and the possession of Cox owned equipment listed on your bill.

When you provide a paper, electronic check or electronic fund transfer (EFT) as payment, you authorize Cox to process your payment as a traditional check transaction or to make a one-time EFT from your account. An EFT may debit your account as soon as the same day you make your payment. Payments returned unpaid for any reason will incur a returned payment fee of up to \$25.00, or the maximum allowed by state law. By using a credit card, debit card, paper check or an electronic check to make a payment, you agree that, if your payment is returned unpaid, you expressly authorize a one-time electronic fund transfer from your account for the amount of the payment plus any returned payment fees. If payment is not received by the "Due By" date indicated on your statement, a late payment charge may be assessed on your account

Closed Captioning: If you have questions or are experiencing problems with your Closed Caption service, please contact us at the phone number on the front of this bill. If we are unable to resolve your Closed Caption concern you may contact:

W.F. Hott, Closed Captioning, Cox Communications, 6205-B Peachtree Dunwoody Rd, Atlanta, GA 30328; Phone: 888-278-6660, Email: closedcaption@cox.com.

Basic Local Telephone Service: You must pay all regulated telephone

RESOURCE INSTITUTE
Account number 001 5711 071045903
Page 5 of 6

Customer Information cont.

charges to avoid disconnection of basic local telephone service. If you pay less than your full monthly bill and want the partial payment applied to telephone charges first, call Cox Customer Care; otherwise, your partial payment will first be applied to any past due balance, including non-regulated charges, putting you at risk of disconnection of telephone service.

911 Services: If your modem is disconnected or moved, or its battery is not charged or otherwise fails, phone service, including access to 911 services will not be available. Please review the following website for additional important information about Cox's 911 practices: https://www.cox.com/business/phone/e911-regulatory.html.

Louisiana Do Not Call List

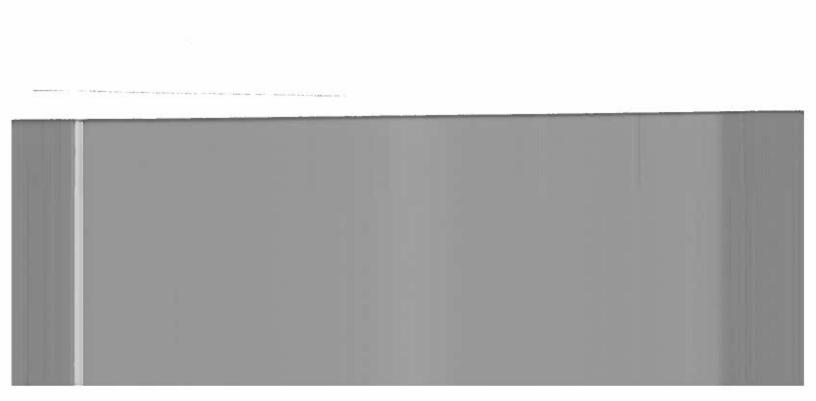
To reduce unsolicited telemarketing calls, LA residential customers can now register, at no charge, for the LA "Do Not Call" program. To register, please contact the LPSC at 1-877-676-0773 or register online at http://www.lpsc.org. Business numbers may not be included on the list. To be included in the National "Do Not Call" registry, please contact the FTC at 1-888-382-1222 or visit www.donotcall.gov.

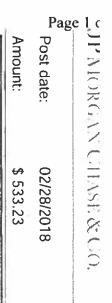
Businesses currently engaging or wishing to engage in telephonic solicitation of residential telephone customers in Louisiana must register annually with the Louisiana Public Service Commission (LPSC) to subscribe to the "Do Not Cail" register. The register, updated quarterly, contains telephone numbers of residential customers who prefer not to be solicited. "Do Not Cail" program rules and registration information may be found on the LPSC website: www.lpsc.org/donotcail, or by calling 1-877-676-0773 toll free. Fines and penalties may be imposed on telephonic solicitors who do not comply with these rules.

Billing Dispute and Resolution

If you have any questions regarding your bill or disagree with any portion of your bill, immediately contact Cox with your concerns. You must contact us no later than 60 days from the bill's due date via the contact information listed on the front of this bill so that Cox can review your account.

To dispute the outcome related to your cable service, you may file a complaint with your local franchising authority: CITY OF BATON ROUGE, PO BOX 1471, BATON ROUGE, LA 70821





Intimut \$ 75000

Account:

Check Number: 5002

S "53323 OOULASS BK CHOUSE SKILLS TO NUMBER ALL STANDAY FE ALL STA

PAY TO THE COX BUSINESS

Five Hundred Thirty-Three and 23/100*

Cox Business P.O Box 919243 Dallas TX, 75391-9243

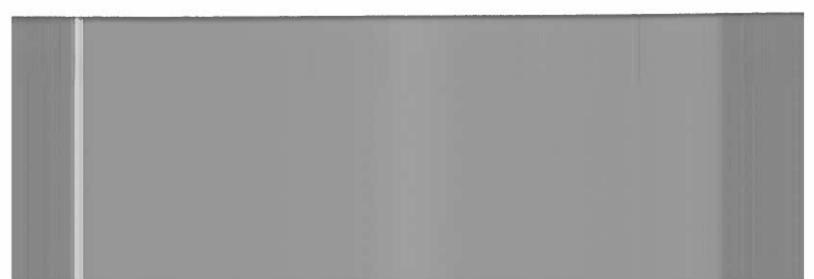
TV, Internet, & Telephone Services

#005002# 110654001374

FAMILY VALUES RESOURCE INSTITUTE, INC Server formation 20 years FO BOARD 2403 20 years BATTON 600-05 100 700074 275-1955 500 700074

file:///C:/Users/ACCOUN~1/AppData/Local/Temp/Low/HFMXEJ8Y.htm

3/14/20



Online Client Destabase

waycool software, inc.

234 Mountain Forest Trail Calera, AL 35040

| n | V | 0 | C | e |
|---|---|---|---|---|
| | w | • | Y | • |

| DATE | INVOICE# |
|-----------|----------|
| 2/28/2018 | MB-18231 |

BILL TO

Louisiana Alliance for Life Family Values Resource Institute, Inc. Post Office Box 74403 Baton Rouge, LA 70874

3/30/2018

| | | | | 3/30/2010 |
|----------------|--|--|----------------------------|-----------|
| ITEM | DESCRIPTIO | N | QTY RATE | AMOUNT |
| CoolFocusWeb M | CoolFocusWeb Monthly Lease
CoolFocus Text Service | | 75.0
15.0 | |
| | | Total | Client Online
Data Base | |
| | | | 50+70° ±
143+00 = * | .* |
| | | | | |
| | | | Total | \$90.00 |
| | | and the spinish and the spinis | Payments/Credit | s \$0.00 |
| Phone # | | E-mail | Balance Due | \$90.00 |
| 888-746-675 | 3 | mike@waycoolsw.com | | |

Sign in

WayCool Software, Inc.

Invoice Paid

Invoice

MB-18231

Due date

March 30, 2018

Invoice total

\$90.00

View details (PDF)

Balance due

\$0.00

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Hancock WHITNEY

Transactions Details

Posting Date

03/15/2018

Transaction Date

03/15/2018

Description

WAY COOL SOFTWAR

Transaction Type

Debit

Amount

\$90.00

Balance

https://secure.hancockwhitney.com/dBanking/home.do

3/15/2018

waycool software, inc.

234 Mountain Forest Trail Calera, AL 35040

| DATE | INVOICE# |
|-----------|----------|
| 2/28/2018 | MB-18182 |

BILL TO

Louisiana Alliance for Life Cenla Pregnancy Center PO Box 13907 Alexandria, LA 71315

DUE DATE

3/30/2018

| | | | | | 3/30/2018 |
|--------------|----------------------------|--------------------|-----|--|------------------------------|
| ITEM | DESCRIPTIO | N | QTY | RATE | AMOUNT |
| | CoolFocusWeb Monthly Lease | | | 50.00 | 50.00 |
| Phone # | | E-mail | | nts/Credits | \$50,00
\$0,00
\$50,00 |
| 888-746-6753 | 3 | mike@waycoolsw.com | | erennen er | |

3/14/2018

WayCool Software, Inc.

Intuit QuickBooks

Invoice Paid

Invoice M

MB-18182

Due date

March 30, 2018

Invoice total

\$50.00

View details (PDF)

Balance due

\$0.00

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Privacy. Terms of service.

Hancock Whitney Bank

Page 1 of 1

n I'me Client Database

🌃 Hancock 💡 WHITNEY

Transactions Details

Posting Date

03/15/2018

Transaction Date

03/15/2018

Description

WAY COOL SOFTWAR

Transaction Type

Debit

Amount

\$50.00

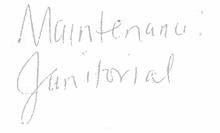
Balance

https://secure.hancockwhitney.com/dBanking/home.do

3/15/2018

Willing Mind Janitorial Service, LLC.

P. O. Box 1773 Prairieville, LA 70769 (225) 677-9839 wmjanitorial@yahoo.com





INVOICE

BILL TO

Barbara J. Thomas Family values Resource Institute, Inc. 7515 Scenic Highway Baton Rouge, La. 70807 DATE 02/27/2018
DUE DATE 03/01/2018
TERMS Net 15

CREDIT

ACTIVITY

Services
Janitorial Service

AMOUNT

757.00

BALANCE DUE

\$757.00



aintenance: Canitorial

WHITNEY Hancock

Transactions Details

Posting Date

03/12/2018

Transaction Date

03/12/2018

Description

DDA CHECK 00000016067

Transaction Type

Debit

T/C

0075

Amount

\$757:00

Balance

Front

Back



FAMILY VALUES RESOURCE INSTITUTE INC. DBA LOUISIANA ALLIANCE FOR LIFE PO BOX 74403 PM. 225-359-8001 BATON ROUGE, LA 70874-4403

84-15/654

DOLLARS 🖻

3/9/2018

PAY TO THE ORDER OF

Willing Minds Janitorial Services, LLC

\$ ••757.00

Willing Minds Janitorial Services, LLC PO Box 1773 Prairieville, LA 70769

MEMO

THE RESERVE OF THE PARTY OF THE

Feb. 2018 invoice #2545

#001606# #065400153#

WHITHEY BANK Member FDIG / whitelybank.com

https://secure.hancockwhitney.com/dBanking/home.do

3/14/2018

Maniferana Daniforial

♦ Hancock ₩HITNEY

Transactions Details

Posting Date

03/12/2018

Transaction Date

03/12/2018

Description

DDA CHECK 0000004606

Transaction Type

Debit

T/C

0075

Amount

\$757.00

Balance

Front

Back

031718 96170001676800 20655036813

https://secure.hancockwhitney.com/dBanking/home.do

3/14/2018

NOTICE OF AUTOMATIC PAYMENT

PAYCHEX

Paychex of New York LLC 4324 South Sherwood Forest Blvd Suite 125 Baton Rouge LA 70816 Client # 0060 0060-T846 Invoice # 2018030100

AUTOMATIC PAYMENT \$242.33

This amount will be deducted from the following bank account at or after 12:01 A.M on 3/12/18.

XXXX0000

ADDRESS SERVICE REQUESTED

0060 0060-T846
Family Values Resource Institute Inc
Institute Inc
Po Box 74403
Baton Rouge, Louisiana 70874-4403

Electronic Payroll
Transaction Fees \$242.33

For questions regarding your account, please call (225) 291-7773

Page 1 of 1

| | ACCOUNT SUMMARY | | 24 2 Project 1 | AMOUNT |
|------------|--|-----------------------------|----------------|---------------------------|
| | Previous Balance on Invoice#2018020100 Due 02/12/18 Payment Received - Thank You Balance Forward | | | 455.38
-455.38
0.00 |
| | Total New Charges | | 一个可能 | 242.33 |
| | Account Balance (Includes Balance Forward, New Charges, | and Pending Automatic Payr | nents) | 242.33 |
| CHECK DATE | DESCRIPTION OF SERVICE | PROCESSING DATE | # TRANSACTIONS | AMOUNT |
| | NEW CHARGES | | | |
| 02/14/18 | Payroll/Taxpay® | 02/13/18 | 7 | 62.66 |
| 02/15/18 | Payroll/Taxpay® Direct Deposit | 02/12/18 | 8 | 71.26
20.60 |
| 02/28/18 | Payroll/Taxpay® Direct Deposit | 02/26/18 | 8 9 | 66.26
21.55 |
| | Total New Charges | | TEMPEN | 242.33 |
| | Automatic Payment (Includes New Charges and applicable of | redits from Balance Forward | above) | 242.33 |
| | Payroll/Taxpay Includes: Payroll Processing,Extra Payroll Re | norte | | erro i |

Pail 3-10-18
Auto pay

0060 0060-T846 Family Values Resource Institute Inc

Invoice Date: 03/01/18

Billing Period: 02/02/18 to 03/01/18

Invoice# 2018030100

Payrolls by Paychex, Inc. #40009

Hancock Whitney Bank

Page 1 of 1

Electronic Payroll Transaction Fees Boy.

Hancock & WHITNEY

Transactions Details

Posting Date

03/12/2018

Transaction Date

03/12/2018

Description

INVOICE PAYCHEX EIB 031218

Transaction Type

Debit

T/C

0036

Amount

\$242.33

Balance

0060 0060-T846 Family Values Resource Institute Inc

5

DESCRIPTION

RATE

EMPLOYEE NAME

HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS

HOURS

EARNING8

REIMB & OTHER
PAYMENTS

WITHHOLDINGS

DEDUCTIONS

NET PAY
ALLOCATIONS

TAYKOLL JOURNAL

**** 300 1099 Crossroads Preg...(IC)
20 Cenia Pregnancy...(IC) Womens Center o...(IC)
27 Pregnancy Probl...(IC)
22 Life Choices of...(IC) Womens Help Center (IC) 28 100 STAFF BI-WEEKLY TOTAL 1099 Misc Comp EMPLOYEE TOTAL 1099 Misc Comp 1099 Misc Comp EMPLOYEE TOTAL EMPLOYEE TOTAL EMPLOYEE TOTAL EMPLOYEE TOTAL EMPLOYEE TOTAL EMPLOYEE TOTAL 8.394;2 TOTAL EMPLOYER LIABILITY 2,200:00 2,200.00 3,200.00 1,200,00 3,200.0 2,200;00 3,200;00 2,200.00 2,200:00 2,200,0 3,200,0 Social Security Medicare Employer Liabilities 201328 1,371,13 52044 12171 Deduction 7: 223,00 Net Pay Net Pay 2,20
Direct Deposit # 488
Check Amt
Chkg 1232 1,20 Direct Deposit # 487
Check Arnt
Chkg 1255 2,2 Direct Deposit # 493
Check Amt
Chkg 8002 2,20 Chkg 0010 Chkg 8302 Check Amt Chkg 3581 Check Amt Chkg 2289 Net Pay Net Pay Net Pay 3,2 Direct Deposit # 491 Direct Deposit # 492 Check Amt Check Amt Direct Deposit # 489 Net Pay Chkg 9749 Direct Deposit # 490 Net Pay Net Pay 0.00 1,200.00 3,200,00 2,200.00 6,800,08 3,200.00 2,200.00 3,200,00 2,200.00 2,200.00 2,200.b0 2,200,00 3,200.00 ,200,00

0060 0060-T846 Family Values Resource Institute Inc Run Date 03/12/18 02:04 PM

Period Start - End Date 03/01/18 Check Date 03/15/18

03/01/18 - 03/15/18 03/15/18

Payroli Journal Page 2 of 3 PYRJAN

0060 0060-T846 Family Values Resource Institute Inc

PAYROLL JOURNAL

| EMPLOYEE NAME | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | IMBURSEM | ENTS & OTHER | PAYMENTS | WITHHOLDINGS | | DEDUCTIONS | Z | NET PAY | Ϋ́ΑΥ |
|--|--|----------|----------------------|------------------------|---|--------------------------------------|---------------------------------------|-----------------|--|-------------------------|
| 5 | DESCRIPTION RATE | HOURS | EARNINGS | REIMB & OTHER PAYMENTS | | | | | ALLOCATIONS | TIONS |
| **** 300 1099 (cont.)
Womens New Life(IC)
24 | 1099 Misc Comp | | | 2,400,00 | | | | | Direct Deposit # 494
Check Amt
Chkg 0051 2 | 494
0.00
2,400.00 |
| | EMPLOYEE TOTAL | | , | 2,400.00 | | ******** | | | Net Pay | 2,400.00 |
| 300 1099 TOTALS 8 Person(s) 8 Transaction(s) | | | | 18,266.67 | | | Deduction | 20.10 | Check Amt | 0.00
18.246.57 |
| | | | | 1000 | | | | 3 | No | 10 3/6 57 |
| | 300 1099 TOTAL | | | 18,266,67 | | | _ | 20:10 | 20:10 Net Pay | 18,246.57 |
| COMPANY TOTALS 15 Person(s) 15 Transaction(s) | Fvri
LAL Hours
1099 Misc Comp | | 1,206.73
7,187.48 | 18,266,6 | Social Security Medicare Fed Income Tax LA Income Tax | 520,46
121,71
496,96
232,00 | Deduction
STD Post-Tax | 20,10
223,00 | Check Amt | 0.00
25,046 85 |
| | COMPANY TOTAL | 14.00 | 8,394.21 | 18,266.67 | | 1,371 13 | | 243:10 | 243.10 Net Pay | 25,046.65 |
| | | •••• | | | Employer Liabilities | ties | | | | |
| | | | | | Social Security
Medicare | 520:44
121:71 | | | | ************ |
| | | | | TOTAL EMPI | TOTAL EMPLOYER LIABILITY | 642:15
2,013:28 | | | \ | |
| (IC) = Independent Contractor | | | | | | | Person | med | | |
| | | | | | | | UI SUCH | ncluded | | |
| | | | ., | | | | 10 the | कंक | | |
| | | | | | | | Harling | 242 | | |
| | | | | | | | for Subco | 2 | CA2 | |
| | | | ****** | | → | | - | | | |
| | | | | | | * | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | かったかったっ | 93 | |
| | | | | | | | 1757CUNI | | | |
| | | | | | | | totala | TANGAN! | | |

0060 0060-T846 Family Values Resource Institute Inc Run Date 03/12/18 02:04 PM

Period Start - End Date 03/01/18 - 03/15/18

Payroll Journal Page 3 of 3

PAYCHEX
0050 0060-T846 Family Values Resource Institute Inc

DIRECT DEPOSITS DETAIL

| Cenla Pregnancy Center Inc (IC) Crossroads Pregnancy Resource (IC) Center (IC) Lite Choices of North Central (IC) Louisiana Pregnancy Problem Center (IC) Womens Center of Lafayette (IC) Womens Help Center (IC) Womens New Life Center (IC) ACAUGES DE YSON NE | | | | | | | | | | urce Institute Inc | 0060 0060-T846 Family Values Resource Institute Inc |
|--|----|--------|----------------|--------------------------|----------------------|-----------------------|--------------------|----------|----------|---|--|
| Can'le Pregnancy Center inc (IC) 38 Net Pay 20000 xxxxxx1235 (05000000 Center inc (IC) 20 Net Pay 1,20000 xxxxxx1232 050000000 Center inc (IC) 20 Net Pay 1,20000 xxxxxx1232 050000000 Center (IC) 22 Net Pay 1,20000 xxxxxx1232 050000000 Center (IC) 22 Net Pay 3,200.00 xxxxxx250 (10,278) Telulation (IC) 22 Net Pay 3,200.00 xxxxxx250 (10,278) Telulation (IC) 22 Net Pay 3,200.00 xxxxx2289 0500000000000000000000000000000000000 | | | | | | | | | | | |
| Consider Pregnancy Consist Inc. (IC) 38 Net Pay 2200.00 xxxxx1255 ab500090 Consist Pregnancy Consist Inc. (IC) 20 Net Pay 1.200.00 xxxxx1255 ab500090 Consist Pregnancy Presource (IC) 20 Net Pay 1.200.00 xxxxx1255 ab500090 Consist Pregnancy Presource (IC) 20 Net Pay 1.200.00 xxxxxx2228 ab500090 Consist Pregnancy Problem Center (IC) 22 Net Pay 3.200.00 xxxxxx2289 ab500090 Whomens Center of Lelayette (IC) 22 Net Pay 2.200.00 xxxxx2289 ab500090 Whomens Center of Lelayette (IC) 27 Net Pay 3.200.00 xxxxx2289 ab500090 Whomens New Life Center (IC) 28 Net Pay 2.200.00 xxxxx2289 ab500090 Whomens New Life Center (IC) 28 Net Pay 2.200.00 xxxxx2289 ab500090 Whomens New Life Center (IC) 24 Net Pay 2.200.00 xxxxx2502 ab500090 ab | | | • | | | 177 | | | | | |
| Certia Pregnancy Center Inc. (IC) 38 Net Pay 2 200.00 | | | | 8 | | | | | | | |
| Centa Pregnancy Center Inc (IC) 38 Net Pay 2,200,00 XXXXXX1255 085000090 Center (IC) 20 Net Pay 1,200,00 XXXXXX1255 085000090 Center (IC) 20 Net Pay 1,200,00 XXXXXX1255 085000090 XXXXXXX1255 085000090 XXXXXXX1255 085000090 XXXXXXXXX0010 285472811 Lute Choices of North Center (IC) 23 Net Pay 3,200,00 XXXXXXXX0010 285472817 Lute Choices of North Center (IC) 22 Net Pay 3,200,00 XXXXXXX0010 285472817 Lute Choices of Lafayette (IC) 27 Net Pay 2,200,00 XXXXXX2289 085000090 XXXXXX2289 085000090 XXXXXXX2289 085000090 XXXXXXX2289 085000090 XXXXXXX2289 085000090 XXXXXXX2289 085000090 XXXXXXX2289 085000090 XXXXXXXX289 085000090 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | Ctors. | ZZ | Mocent | CAL S | ~ | Dta | | | | |
| Cenils Pregnancy Cenner Inc. (IC) 38 Net Pay 2,200.00 xxxxxx1255 (06500099) Crossroads Pregnancy Resource (IC) 20 Net Pay 1,200.00 xxxxxx1255 (06500099) Center (IC) 23 Net Pay 1,200.00 xxxxxx1232 (06500099) Lille Choness of North Central (IC) 23 Net Pay 3,200.00 xxxxxxx1232 (06500099) Lille Choness of North Central (IC) 23 Net Pay 3,200.00 xxxxxxx1232 (06500099) Whomens Center (IC) 22 Net Pay 3,200.00 xxxxxxx00010 285/72317 Whomens Center (IC) 27 Net Pay 2,200.00 xxxxxx00010 285/72317 Whomens New Life Center (IC) 28 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 24 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 24 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 24 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 24 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 25 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) Whomens New Life Center (IC) 26 Net Pay 2,200.00 xxxxxx0002 (06500099) | | () | | | | | | (Javano | TO TO | (Includes | \$ 25,044.65 |
| Cental Pregnancy Center Inc (IC) 38 Net Pay 2,200.00 | | / | | 16 Entries | 25,046.65 | MPANY TO
15 Employ | 8 | | | | tha |
| Centa Pregnancy Center Inc (IC) | | | | 0 Savings
16 Checking | 25,046.65 | | | e) | Lucs | (Includes pe | 100 5 7 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Cenia Pregnancy Cenier inc (IC) 38 Net Pay 2.200.00 XXXXXXX1255 205000090 Crossroads Pregnancy Resource (IC) 20 Net Pay 1.200.00 XXXXXXX1255 205000090 Life Choices of North Central (IC) 23 Net Pay 3.200.00 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | | | 9 Entries | 18,246.57 | 8 Emplo | Æ | | | | |
| Cenila Pregnancy Cenier inc (IC) 38 Net Pay 2.200.00 XXXXXX1255 4065000090 Crossroads Pregnancy Resource (IC) 20 Net Pay 1.200.00 XXXXXX1232 065000090 Life Choices of North Central (IC) 23 Net Pay 3,200.00 XXXXXXXXX0010 265473317 Louisiana (IC) 23 Net Pay 3,200.00 XXXXXXXXXX0010 265473317 Pregnancy Problem Cenier (IC) 23 Net Pay 3,200.00 XXXXXXXXXX0010 265473317 Womens Cenier of Lalayette (IC) 27 Net Pay 2,200.00 XXXXXXXX2289 065000090 Womens New Life Cenier (IC) 28 Net Pay 2,200.00 XXXXXXX2289 065000090 Womens New Life Cenier (IC) 28 Net Pay 2,200.00 XXXXXXX0002 065000090 Womens New Life Cenier (IC) 24 Net Pay 2,400.00 XXXXXXX00051 065000090 | | | | 0 Savings
9 Checking | 18,246.57 | | | | | | × |
| Cenia Pregnancy Cenier inc (iC) | | | 06500 | хххххх0051 | 2,400.00 | | Net Pay | | (PC) | Prometts New Life Center | 7 |
| Cenia Pregnancy Center inc (IC) 38 | | | 06540 | ххххх8002 | 2,200.00 | | Net Pay | | Ē | Woman Name is | |
| Centa Pregnancy Center inc (IC) | | | 06520 | xxx9749 | 3,200.00 | | Net Pay | | 3 3 | Womens Help Center | |
| Cenila Pregnancy Ceniler Inc (IC) 38 Net Pay 2.200.00 XXXXXX1255 405000090 Crossroads Pregnancy Resource (IC) 20 Net Pay 1.200.00 XXXXXX1232 065000090 Center (IC) Net Pay 1.200.00 XXXXXXXX232 065000090 Life Choices of North Central (IC) 23 Net Pay 3,200.00 XXXXXXXXXX0010 265473511 Louisiana 111102758 111102758 111102758 | | | 06500 | хххххх2289 | 2,200.00 | | Net Pay | | <u> </u> | Pregnancy Problem Center Womens Center of Lafavere | |
| Cenia Pregnancy Center Inc (IC) 38 Net Pay 2,200.00 xxxxxx1255 065000090 Center (IC) 20 Net Pay 1,200.00 xxxxxx1232 065000090 xxxxxxx0010 265473317 xxxxxxxx0010 265473317 | | | 11110 | ххх3581 | 3,200.00 | | Net Pay | 23 | (ic) | Life Choices of North Central
Louisiana | |
| Center CALCULATED ACCOUNT NUMBER ROUTING & AMOUNT TRANSIT CALCULATED ACCOUNT NUMBER ROUTING & AMOUNT TRANSIT Conter CALCULATED ACCOUNT NUMBER ROUTING & AMOUNT TRANSIT 1.200.00 XXXXXXX1255 2065000090 2.200.00 XXXXXXX1232 065000090 1.200.00 XXXXXXX1232 065000090 | į. | | 26547
26547 | 20E8xxxxxxx | | | Net Pay
Net Pay | | (5) | | |
| Cenia Pregnancy Center Inc (IC) 38 Net Pay 2,200.00 XXXXXX1255 3065000000 | | | 06500 | xxxxxx1232 | 1,200.00 | | Net Pay | 20 | | Crossroads Pregnancy Resource
Center | O 8 + 000400153 |
| DEPOSIT CALCULATED ACCOUNT NUMBER ROUTING & AMOUNT TRANSIT | | | 06500 | xxxxxx1255 | 2,200.00 | | Net Pay | æ | | Cenia Pregnancy Center Inc | HANCOCK BANK OF LOUISIANA
ACCT # XXXXX380T
B & TORSXXX380T |
| | | | ROUT | ACCOUNT NUMBER | CALCULATED
AMOUNT | DSIT | DEP | 8 | A | EMPLOTEE NAME | |

Period Start - End Date 03/01/18 - 03/15/18 Check Date 03/15/18

Direct Deposits Detail
Page 2 of 2
EEDIRDEP

Transactions Details

Posting Date 03/14/2018

Transaction Date 03/14/2018

Description PAYROLL PAYCHEX INC. 031418

Transaction Type Debit

T/C 0036

Amount \$18,246.57

Balance

Accounting / Bookkeeping \$1304.86 Invoice

| Date | Invoice # |
|-----------|-----------|
| 2/15/2018 | 39 |

1175 Lakemont Dr. Baton Rouge, LA 70816

Bill To Louisiana Alliance For Life Family Values Resouce Institute, Inc 7515 Scenic Highway Baton Rouge, LA 70807

| | Description | | Amount |
|-------------------------------------|--|-------|----------------|
| Bookkeeping Services Feb 1 - Feb 15 | Description Total Profession Accel Bostocia 1,304.85 + Acel Bostocia 1,304.86 + Public Relatives - 3 10-10 + Evaluation - 4,300.00 + Auditor - 4,300.00 + Total | | Amount 1,646.5 |
| | | Total | \$1.646.5 |

Hancock Whitney Bank

Accounting Book Keeping \$1304.86

THANCOCK WHITNEY

Transactions Details

Posting Date

02/14/2018

Transaction Date

02/14/2018

Description

PAYROLL PAYCHEX INC. 021418

Transaction Type

Debit

T/C

0036

Amount

\$1,646.57

Balance

Accounting/ Bookkeeping #130456

Invoice

1175 Lakemont Dr. Baton Rouge, LA 70816

Latosha Isaac

| Date | Invoice # |
|-----------|-----------|
| 2/28/2018 | 40 |

| Bill To | |
|--|--|
| Louisiana Alliance For Life Family Values Resouce Institute, Inc 7515 Scenic Highway | |
| Baton Rouge, LA 70807 | |
| | |

| Description | A | mount |
|------------------------------------|--------|-----------|
| okkeeping Services Feb 16 - Feb 28 | | 1,646.5 |
| okkeeping Services 100 10 - 100 20 | | |
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 | |
| | Total | \$1,646.5 |
| | I Otal | |
| | | |

Accounting/Bwkkeeping \$130486

Thancock WHITNEY Page 1 of 1

Transactions Details

Posting Date

02/27/2018

Transaction Date

02/27/2018

Description

PAYROLL PAYCHEX INC. 022718

Transaction Type

Debit

T/C

0036

Amount

\$1,646.57

Balance

Public Relations

Resource & Fund Development, LLC

5525 Superior Drive, Ste. C2 Baton Rouge, LA 70816

| Invoice | | n | V | 0 | i | C | e |
|---------|--|---|---|---|---|---|---|
|---------|--|---|---|---|---|---|---|

| Date | Invoice # |
|----------|-----------|
| 3/6/2018 | 79 |

| Bill To | |
|--|---|
| FVRI
7515 Scenic Highway
Baton Rouge, LA 70807 | |
| | · |

| P.O. No. | Terms | Project |
|----------|-------|---------|
| | | |

| Quantity | Description | | Rate | Amount |
|----------|---|-----------------|--------|----------|
| Quantity | Public Relations activities for February 2018: * Scheduled several appointments with Ashley and Micha * Met with Sarah on several occasions of nola.com. * Responded to emails | el of nola.com. | 800.00 | 800.00 |
| | J | | Total | \$800.00 |

Evaluator

Resource & Fund Development, LLC

5525 Superior Drive, Ste. C2 Baton Rouge, LA 70816

Invoice

| Date | Invoice # |
|----------|-----------|
| 3/6/2018 | 80 |

| Bill To | |
|--|--|
| FVRI
7515 Scenic Highway
Baton Rouge, LA 70807 | |

| Evaluation Activities for February 2018 Requested data from subcontractors and reminded them of deadline. Reminded subcontractors to complete the client service forms. Responded to subcontractors' emails. Responded for subcontractors' data on database. Checked for subcontractors' data on database. Checked for subcontractors, whose data was not on the Number of Women Who Commit to Full-Term Pregnancy, report. Intered data on TANF database. Called Barbara Thomas that data had been entered on TANF database. Emailed and called Michael Ferris that data was complete and ready for approval. Sent email to Barbara and Michael re year-to-date performance indicators, and suggestions for corrective actions. |
|--|
| |

l'ublic Relations 8800 00 Evaluator \$190000

Transactions Details

Posting Date

03/14/2018

Transaction Date

03/14/2018

Description

DDA CHECK 0000001607

Transaction Type

Debit

T/C

0075

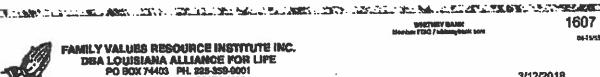
Amount

\$1,700.00

Balance

Front

Back



FAMILY VALUES RESOURCE INSTITUTE INC.
DBA LOUISIANA ALLIANCE FOR LIPE
PO BOX 74403 PH. 228-359-8001
BATON ROUGE, LA 70674-4403

3/12/2018

1607

PAY TO THE CADER OF Resource & Fund Development

\$ ~1,700.00

One Thousand Seven Hundred and 00/100******

DOLLARS 🐧

Resource & Fund Development 5525 Superior Drive, Ste.C2 Baton Rouge, LA. 70816

MEMO

February 2018 Invoices # 79 & 80

#001507# #065400153#

486513800

3/15/2018

Public Relations & Evaluator

Transactions Details

Posting Date

03/14/2018

Transaction Date

03/14/2018

Description

DDA CHECK 0000001607

Transaction Type

Debit

T/C

0075

Amount

\$1,700.00

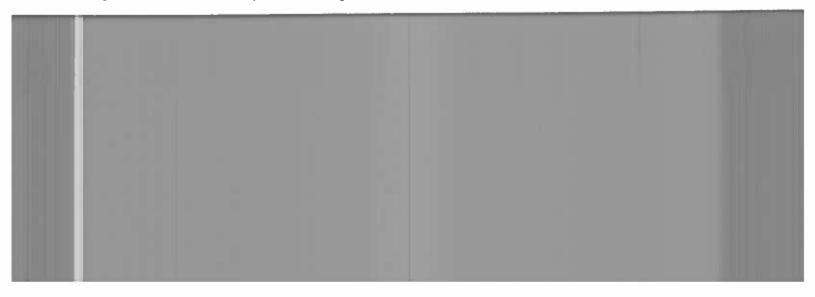
Balance

Front

Back

https://secure.hancockwhitney.com/dBanking/home.do

3/15/2018









LUTHER SPEIGHT & COMPANY, LLC Certified Public Accountants and Consultants

February 9, 2018

INVOICE#:

18-299

CLIENT:

Family Values Resources Institute, Inc.

Baton Rouge, Louisiana

SERVICES PERFORMED:

Independent Audit for the Year Ended December 31, 2017

FEE:

Total Audit Fee

Less Retainer

Balance Due

\$11,000 (\$4,000)-pd 2/28/2018 CK#105 \$ 7,000 Submitted W/ Engagement Jetter alance is due no later than June 30, 2018. Attache

(Please note that the balance is due no later than June 30, 2018.

It is our pleasure to serve as your agency's independent auditors.

New Orleans Office: 1100 Poydras Street, Suite 1225/New Orleans, LA 70163/ (504)561-8600 Baton Rouge Office: 2900 Westfork Drive, Suite 401/Baton Rouge, LA 70827/ (225)275-9100

FAMILY VALUES RESOURCE INSTITUTE INC
PO BOX 7403
BATCH ROUGE, LA 70074
(229) 359-0001

DATE

PAY
CORDER OF WHAT

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DATE

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CORDER OF WHAT

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CORDER

0060 0060-T846 Family Values Resource Institute Inc

0060 0060-T846 Family Values Resource institute Inc Run Date 02/12/18 03:57 PM Period Start - End Date 02/01/18 - 02/15/18 Check Date 02/15/18

Payroll Journal Page 1 of 2 PYRJRN

PAYROLL JOURNAL

| - | | |
|--------------------|------|--|
| Economic Stability | DCFS | |

| 0060 0060-T846 Family Values Resource Institute Inc | s Resource Institute Inc | | | | | | DCFS | |
|---|--|---------------|---------------------|------------------------|--|---|--|----------------|
| EMPLOYEE NAME | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | S, REIMBURSEM | ENTS & OTHER I | PAYMENTS | WITHHOLDINGS | DEDUCTIONS | Economic Stability | |
| 5 | DESCRIPTION RATE | HOURS | EARNINGS | REIMB & OTHER PAYMENTS | | | ALLOCATIONS | SNC |
| | | | ····· | | | | ****** | |
| ** 100 STAFF BI-WEE | FVri | | 1,041,66 | | Social Security 6 | 6458 STD Post-Tax | 35.77 Direct Dennett # 57 | D
Ji |
| | | | ****** | | | | Check Amt | 0.00 |
| Dotte France | | | | | Fed Income Tax 7 LA Income Tax 2 | 77.81
26.00 | Chkg 0017 | 821,45 |
| | EMPLOYEE TOTAL | [AL | 1,041.66 | | 18 | 183:49 | 36:72 Net Pay | 821,45 |
| Davis, Allison | Fvn | | 1,041,66 | | curity | 64:58 STD Post-Tax | | 86 |
| Canatra | | | | | LA Income Tax 2 | 2500 | Check Amt
Chkg 3799 | 0.00
911.01 |
| 2117 | EMPLOYEE TOTAL | AL | 1,041,66 | | | 104;68 | 25.97 Net Pay | 911.01 |
| | LAL Hours | | 437;50
1,020;83 | ****** | Social Security 9 Medicare 2 | 90;42 STD Post-Tax
21:15 | 99,29 Direct Deposit # 6787
Check Amt | 0.00 |
| Charlowar | | | | | ne Tax
e Tax | 8313
3000 | Chkg 0014 | 1,154.54 |
| COSCINCTO | EMPLOYEE TOTAL | [AL | 1,458:33 | | 20 | 204:70 | 99.29 Net Pay | 1,154,34 |
| 5 O Michael A | LAL Hours | | 291.67
1.166.67 | ***** | Social Security 9 Medicare 2 | 90.42 | Direct Deposit # 6788 | 88 |
| | | | | ••••• | ne Tax
e Tax | 101:38
46:00 | Chkg 1002 | 1,199.39 |
| | EMPLOYEE TOTAL | [AL | 1,458.34 | | 25 | 258,96 | Net Pay | 1,199.39 |
| | | -
 | | | Social Security Medicare | | Direct Deposit # 6789 | .89 |
| | | | ••••• | | LA Income Tax | • | Chkg 5358 | |
| | EMPLOYEE TOTAL | [AL | | | | - | Net Pay | |
| 11 | LAL Hours | | 208;34
1,875;00 | | Social Security 12
Medicare 3 | 129;17 STD Post-Tax
30:21 | eposit #67 | 90
00 |
| 730,64 | | | ********* | | ne Tax
e Tax | 155 <u>83</u> | | 1,655.33 |
| ファスのア | EMPLOYEE TOTAL | [AL | 2,083,34 | | 38 | 380:01 | 48:00 Net Pay | 1,655.33 |
| Walker, Shirley | LAL Hours | | 1,041 66 | | Social Security 6 | 6458 STD Post-Tax | 13:02 Direct Deposit # 6791 | - 1 |
| Clert Yerse | | | | | ne Tax
e Tax | 9901 | Chkg 2191 | 823.95 |
| Cordinator | EMPLOYEE TOTAL | īĄL | 1,041 66 | | 28 | 204,69 | 13,02 Net Pay | 823,95 |
| 7 Person(s) Fvii 7 Transaction(s) LAL Hc | Fvri
LAL Hours | 14.00 | 3,290,05
5,10416 | | Social Security 52 Medicare 12 Red Income Tax 46 | 520:44 STD Post-Tax
121:71
496:96 | 22300 Check Amt
Dir Dep | 0.00 |
| | · | | ********** | | | 222,00 | | |

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0060 0060-T846 Family Values Resource Institute Inc Run Date 02/12/18 03:57 PM

Period Start - End Date 02/01/18 - 02/15/18 Check Date 02/15/18

Payrol Journal Page 2 of 2 PYRJRN

| EMPLOYEE NAME | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | EIMBURSEN | ENTS & OTHER I | PAYMENTS | WITHHOLDINGS | GS
— | DEDUCTIONS | | NET PAY | 4 |
|--|--|--------------|----------------------|------------------------|--|--------------------------------------|---|------------------|-----------------------------------|------------------|
| ID | DESCRIPTION RATE | HOURS | EARNINGS | REIMB & OTHER PAYMENTS | | | | | ALLOCATIONS | ONS |
| 100 | 100 STAFF BI-WEEKLY TOTAL | 14.00 | 8,394,21 | | | 1,361 11 | | 223,00 | 223,00 Net Pay | 6.810.10 |
| | | | | | Employer Liabilities | ies | | | | |
| | | ,, | | ····· | Social Security
Medicare | 520,44
121,71 | | | | |
| | | ************ | | TOTAL EMPI | TOTAL EMPLOYER LIABILITY | 64215
2,003,26 | | | | |
| **** 300 1099
Isaac, Latosha S (IC)
36 | 1099 Misc Comp
1099 Misc Comp | | | 361:81
1,304:86 | | ••••• | Deduction | 20.10 | Direct Deposit # 478 Check Amt | 478 |
| | EMPLOYEE TOTAL | | | 1,666.67 | | | | 20.10 | | 1,646.57 |
| 300 1099 TOTALS
1 Person(s)
1 Transaction(s) | | | | 1,666.67 | | | Deduction | 20
10 | Check Amt
Dir Dep | 0.00
1,646.57 |
| | 300 1099 TOTAL | | | 1,666.67 | | | | 20:10 | 20:10 Net Pay | 1,646.57 |
| COMPANY TOTALS 8 Person(s) 8 Transaction(s) | Fvri
LAL Hours
1099 Misc Comp | 14.00 | 3,290,05
5,104,16 | | Social Security Medicare 1,666,67 Fed Income Tax LA Income Tax | 520,44
121,71
496,96
222,00 | 520,44 Deduction
121,71 STD Post-Tax
496,96
222,00 | 20,
20,
10 | 20,10 Check Amt
223,00 Dir Dep | 0.00
8,456.67 |
| | COMPANY TOTAL | 14.00 | 8,394,21 | 1,666.67 | | 1,361,11 | | 243.10 | 243 10 Net Pay | 8,456.67 |
| | | | | | Employer Liabilities | ities | | | | |
| | | | | | Social Security
Medicare | 520.44
121.71 | | | | |
| | | | | TOTAL EMP | TOTAL EMPLOYER LIABILITY | 642:15
2,003:26 | | | | |
| (IC) = Independent Contractor | | | | | | | | | | |
| | | | | | | bii | | 51 757 | | |
| | | | | | | ***** | | ***** | | |

PAYROLL JOURNAL

| EMPLOYEE NAME | HOURS, EARNII | iGS, RI | EIMBURSEN | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | PAYMENTS | WITHHOLDINGS | DEDUCTIONS | NET PAY |
|--|-------------------|-----------|-----------|--|------------------------|---|----------------|---|
| 8 | DESCRIPTION | RATE | HOURS | EARNINGS | REIMB & OTHER PAYMENTS | | | ALLOCATIONS |
| **** 100 STAFF BI-WEE
Brown, Patricia A | LAL Hours | | | 1 041 67 | | Constitution | Dog Har | |
| 35 Data | | 8 (308 | | | | × | 5 | Check Amt 0.00
Chkg 0017 821.45 |
| Entre | EMPLOYEE T | TOTAL | | 1.041.67 | | 18350 | | |
| Davis, Allison | - 1 | | | 1,041.67 | | curity | STD Post-Tax | Direct Deposit # 6793 |
| "Thurston | | ********* | | | | Medicare 15:11
LA Income Tax 25:00 | 8 = | Check Amt 0.00
Chkg 3799 911.01 |
| おいからか | EMPLOYEE | TOTAL | | 1,041,67 | | 10469 | | 25,97 Net Pay 911,01 |
| Davis, Talisha | Fyri
Al Hours | | | 437,50 | | curity | STD Post-Tax | eposit # 6794 |
| Complant (| 1 | | | | | Fed Income Tax 30:00 | 8 2 2 | Check Amt 0.00
Chkg 0014 1.154.36 |
| COCACAMAGOR | EMPLOYEE 1 | TOTAL | .i | 1,458,34 | | 204:69 | | 9929 Net Pay 1,154.36 |
| 5) Wichael A | LAL Hours | | | 291 67
1,166 67 | | Social Security 90;42
Medicare 21:14 | 40 | eposit # 679 |
| 7 | | ····· | | | | neTax · | 8 8 | 1,19 |
| | EMPLOYEE 1 | TÖTAL | | 1,458,34 | | 258.94 | 92 | Net Pay 1,199,40 |
| | | | | ••••• | | Social Security Medicare LA Income Tax | 33 · | Direct Deposit # 6796 Check Amt Chko 5358 |
| 1- | EMPLOYEE | TOTAL | | | | | | Net Pay |
| Thomas, Barbara J | Evri
LAL Hours | - je | | 208:34
1.875:00 | | Social Security 129;17
Medicare 30:20 | STD Post-Tax | sit # 6797 |
| Dage C | : | | | | | neTax 1
eTax | 888 | Chkg 0016 1,655,34 |
| () 1 CO W | EMPLOYEE | TOTAL | | 2,083,34 | | | | 48:00 Net Pay 1,655.34 |
| ^ | LAL Hours | ******* | | 1,041.67 | | Social Security 64:58
Medicare 15:11 | STD Post-Tax | eposit # 679 |
| CHOCK KAVING | | | | | | ne Tax
e Tax | 99;01
26:00 | œ |
| 100 STAFF BI-WEEKLY TOTALS | EMPLOYEE | TOTAL | | 1,041,67 | | 204.70 | 70 | 13,02 Net Pay 823,95 |
| 7 Person(s)
7 Transaction(s) | Fvn
LAL Hours | | 74.00 | 1,206.73
7,187.52 | | Social Security 520,44 Medicare 121;72 Fed Income Tax 496;96 LA Income Tax 222,00 | STD Post-Tax | 223,00 Check Amt 0.00
Dir Dep 6,810.13 |
| 2000 1000 1000 1000 1000 1000 1000 1000 | | | 13 | , | | • | - | - |

0050 0050-T845 Famity Values Resource Institute Inc Run Date 02/26/18 02:07 PM

Period Start - End Date 02/16/18 - 02/28/18 Check Date 02/28/18

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0060 0060-T846 Family Values Resource Institute Inc.

PAYROLL JOURNAL

| EMPLOYEE NAME | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | EIMBURSEM | ENTS & OTHER | PAYMENTS | WITHHOLDINGS | _ | DEDUCTIONS | _ | NET PAY | < |
|--|--|-----------|----------------------|---------------------------|---|--|---|-----------------|-----------------------------------|------------------|
| 8 | DESCRIPTION RATE | HOURS | EARNINGS | REIMB & OTHER
PAYMENTS | | | | | ALLOCATIONS | SNO |
| 100 \$ | 100 STAFF BI-WEEKLY TOTAL | 14.00 | 8,394,25 | | | 1,361,12 | | 223,00 Net Pay | Net Pay | 6,810.13 |
| | | | | | Employer Liabilities | | | | | |
| | | | | | Social Security
Medicare | 520,44
121,71 | | | | ********** |
| | | | | TOTAL EMPL | TOTAL EMPLOYER LIABILITY | 642.15
2,003.27 | | | | |
| **** 300 1099
Isaac, Latosha S (IC)
36 | 1099 Misc Comp
1099 Misc Comp | | | 361,81
1,304,86 | | | Deduction | 20.10 | Direct Deposit # 486
Check Amt | 86
0.00 |
| | | | | | | | | | Chkg 8302 | 90,00 |
| 300 1099 TOTALS | בושדרטזבה | | | 1,000,07 | | - | | 20,10 | 20,10 Net Pay | 1,646,57 |
| 1 Person(s)
1 Transaction(s) | 1099 Misc Comp | | | 1,666.67 | | 2 | Deduction | 20,10 | 20:10 Check Amt
Dir Dep | 0.00 |
| | 300 1099 TOTAL | | | 1,666,67 | | | | 20,10 | 20,10 Net Pay | 1,646.57 |
| COMPANY TOTALS | | | | | | | | | | - |
| 8 Person(s)
8 Transaction(s) | Fvri
LAL Hours
1099 Misc Comp | 14.00 | 1,206 73
7,187 52 | 1,666.67 | Social Security Medicare Fed Income Tax LA Income Tax | 520.44 D
121.72 S
496.96
222.00 | 520.44 Deduction
121:72 STD Post-Tax
496;96
222;00 | 20.10
223.00 | 20:10 Check Amt
223:00 Dir Dep | 0.00
8,456.70 |
| | COMPANY TOTAL | 14.00 | 8,394:25 | 1,666,67 | | 1,361:12 | | 243,10 | 243:10 Net Pay | 8,456.70 |
| | | | | | Employer Liabilities | ري
 | | | | |
| | | | | ******** | Social Security
Medicare | 52044
12171 | | | | |
| | | | | TOTAL EMPI | TOTAL EMPLOYER LIABILITY | 642.15
2,003.27 | | | | |
| (IC) = Independent Contractor | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

0060 0060-T846 Family Values Resource Institute Inc Run Date 02/26/18 02:07 PM

Period Start - End Date Check Date

02/16/18 - 02/28/18 02/28/18

Payroll Journal Page 2 of 2 PYRJRN



An After-the-Fact Distribution of Efffort Form must be completed by each employee working on projects funded in whole or in part from external sources.

| | • | | |
|---------------------|-------------|--------|--|
| Name: Talisha Davis | Month/Year: | Feb-18 | |

Provide a breakdown of your responsibilities for this month. Keep in mind:

- 1. 100% of effort is an employee's total hours actually spent on work within the scope of his or her employment regardless of the percent FTE listed on the appointment.
- 2. The combined % of time on major work performed for a project must equal must equal the Total % of time on Project.
- 3. The combined total effort on all projects reported must equal 100%.

| Sponsored Project: LA Alliance For Life | e |
|---|-----------|
| List Major Work Performed | % of Time |
| Prepare for and participate in a radio broadcast taping on abortion | 15 |
| Communication w/ Sub-Contractors- questions & expectations & compliance | 15 |
| Prepare and faciliate staff meeting. | 15 |
| Make database revisions, changes & training | 25 |
| Total % o
on Proj | |

| Sponsored Project: Family Values Resource Institu | ıte |
|--|-----------|
| List Major Work Performed | % of Time |
| Counseling Clients - Pregnancy Testing & providing referrals as needed | 10 |
| Work with student mentee on project & research paper | 10 |
| Edit Policies & Procedures Manual | 10 |
| Total % of Time
on Project: | 30 |

| Sponsored Project: | |
|---------------------------|--------------------------------|
| List Major Work Performed | % of Time |
| | |
| | Total % of Time
on Project: |

Employee Signature

Approval/Signature

Date



An After-the-Fact Distribution of Efffort Form must be completed by each employee working on projects funded in whole or in part from external sources.

| projects funded in whole or in part from external sources. | |
|--|-----------|
| Name: Shirley Walker Month/Year: Mar-18 | |
| Provide a breakdown of your responsibilities for this month. Keep in mind: 1. 100% of effort is an employee's total hours actually spent on work within the scope of I employment regardless of the percent FTE listed on the appointment. 2. The combined % of time on major work performed for a project must equal must equal % of time on Project. 3. The combined total effort on all projects reported must equal 100%. | |
| Sponsored Project: | |
| List Major Work Performed | % of Time |
| Counseling: Consult w/ clients, give pregnancy tests & complete TANF paperwork | 70% |
| Coordinate client services such as scheduling, referral information, chart preparation, | 15% |
| answering phones, etc | |
| Supervise front office, train counselors and volunteers; Assist counselors w/ questions | 10% |
| Total % of Time
on Project: | |
| Sponsored Project: | |
| List Major Work Performed | % of Time |
| regarding client services, paperwork, etc ; Assist with Quarterly mailout | |
| Keep track of supplies needed for client services such as pregnancy tests, cups & charts | 5% |
| Total % of Time
on Project: | 100% |
| Ol Troject. | 10070 |
| Sponsored Project: | |
| List Major Work Performed | % of Time |
| | |
| | |
| | |
| | <u></u> |
| Total % of Time
on Project: | |
| Shuley Walker Employee Signornie 2/2/// | 18 |



An After-the-Fact Distribution of Efffort Form must be completed by each employee working on projects funded in whole or in part from external sources.

Name: Patricia Brown

Month/Year: Mar-18

| Name: Patricia Brown | Month/Year: | Mar-18 | |
|--|---|--|-----------|
| Provide a breakdown of your responsibilities. 1. 100% of effort is an employee's total how employment regardless of the percent FTE. 2. The combined % of time on major work % of time on Project. 3. The combined total effort on all project. | urs actually spent on work
Elisted on the appointme
performed for a project r | c within the scope of t
nt.
nust equal must equo | |
| Sponsored Project: | Louisid | ana Alliance For Life | |
| List Major Work Performed | | | % of Time |
| Data Entry - Enter client data into databa | se: Prenare and submit m | onthly reports | 40% |
| | | | 30% |
| Receptionist Duties - Answer phone and so | cheaule appointments | L L TANE a second | |
| Counseling - Give pregnancy test and ref | errels based on need, co | mplete IANF paperwo | 30% |
| | | Total % of Time on Project: | 100% |
| | | | |
| Sponsored Project: | | | |
| List Major Work Performed | | | % of Time |
| List Midjor Fronci Circums | | | |
| | | | |
| | | | |
| | | | |
| | | - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 | |
| | | Total % of Time | |
| | | on Project: | |
| Sponsored Project: | | | |
| List Major Work Performed | | · · · · · · · · · · · · · · · · · · · | % of Time |
| usi Majai wak renamed | | | |
| | | | |
| | | | |
| | | | |
| | | Total % of Time | _ |
| | | on Project: | |
| | | | |
| Empleyee Signature | oc | 3-6-16
Date | 3 |
| DINOM | | 3-6-18
Date | |



An After-the-Fact Distribution of Efffort Form must be completed by each employee working on projects funded in whole or in part from external sources.

| Name: Allison Davis Month/Year: Feb-18 | |
|---|----------------------------|
| Provide a breakdown of your responsibilities for this month. Keep in mind: 1. 100% of effort is an employee's total hours actually spent on work within the employment regardless of the percent FTE listed on the appointment. 2. The combined % of time on major work performed for a project must equal % of time on Project. 3. The combined total effort on all projects reported must equal 100%. | |
| Sponsored Project: LA Alliance F | or Life |
| List Major Work Performed | % of Time |
| Client data entry | 30% |
| Taught individual prenatal classes | 40% |
| Followed up with clients over the telephone | 10% |
| Re organizing the Baby Boutuique | 20% |
| | % of Time
Project: 100% |
| Sponsored Project: | |
| List Major Work Performed | % of Time |
| | |
| | |
| | |
| | |
| | % of Time
Project: |
| Sponsored Project: | |
| List Major Work Performed | % of Time |
| | |
| | |
| | |
| | % of Time
Project: |
| Engloyee Signature 3/ | 16/2018 |



| Marros Parhara Thomas | Month/Voor | Fob18 |
|--|-----------------------|-----------------------------|
| projects funded in whole o | or in part from exter | nal sources. |
| An After-the-Fact Distribution of Efffort Form m | ust be completed I | by each employee working on |

| Name: Barbara Thomas | Month/Year: Feb-18 |
|----------------------|--------------------|
| | |

Provide a breakdown of your responsibilities for this month. Keep in mind:

- 1. 100% of effort is an employee's total hours actually spent on work within the scope of his or her employment regardless of the percent FTE listed on the appointment.

| LA Alliance for Life - Project Directo - % | of Time |
|--|--|
| regnancy Centers | 10 |
| 's Help Center | 25 |
| (Emergency situations only) | 0 |
| contractors | 15 |
| | 0 |
| | |
| ement evaluation pan | |
| bsences, etc. | 5 |
| | |
| | 5 |
| | ~~ |
| Training | 20 |
| Training | 20
90 |
| Family Values Resource Institute, Inc. % | 90 |
| | 90 |
| | 90 |
| | 90 |
| | 90 |
| | 90 |
| | 90 |
| | 90
of Time |
| | ement evaluation pan absences, etc. endor and subcontractor payments, etc. ve for LA Alliance for Life (LAL) |



An After-the-Fact Distribution of Efffort Form must be completed by each employee working on projects funded in whole or in part from external sources.

| Name: Michael Ferris | Month/Year: | FEBRUARY 2018 | |
|---|---|--|-----------|
| Provide a breakdown of your responsibilities for 1. 100% of effort is an employee's total hours of employment regardless of the percent FTE lists 2. The combined % of time on major work per of time on Project. 3. The combined total effort on all projects reports to the percent of time on Projects. | actually spent on worl
ed on the appointme
formed for a project r | c within the scope of l
nt.
nust equal must equa | |
| Sponsored Project: | Louis | iana Alliance For Life | " |
| List Major Work Performed | | | % of Time |
| Collect, Review and Approve Subcontractor I | Reimbursements | | 40% |
| Fielding and Answering Calls and emails from | Subcontractors | | 30% |
| Creating and updating forms and files | | - | 10% |
| Preparing for conference 3/24/18 | | | 20% |
| | | Total % of Time | <u> </u> |
| | | on Project: | 100% |
| Sponsored Project: | Louisiana A | lliance For Life - cont | inved |
| List Major Work Performed | | | % of Time |
| | | | |
| | | | |
| | | | |
| | | | |
| | | Total % of Time | |
| | | on Project: | 100% |
| Sponsored Project: | | | |
| List Major Work Performed | | · · · · · · · · · · · · · · · · · · · | % of Time |
| | | | |
| | | | |
| | | | |
| | <u> </u> | | |
| | | Total % of Time | |
| | | on Project: | |
| | | | |
| Employee Signature | | 3/12/18
Date | - |

Approval Signature

stade words I have a terminal of terminal of

GRETNA LA 70056 401 WHITNEY AVENUE SUITE 200 PAYCHEX, INC. (844) 729-9247

Soc Sec and Med and Federal Withholding Tax

EFTPS Mandated: Initiate new 941 EFT deposit for the specified quarter at least one banking day before the due

the due date. Non-mandated: Initiate a 941 payment for the specified quarter at www.eftps.gov.at least one banking day before

Amount Due: Due Date: Deposit Period 02/01/18 - 02/28/18 \$3,562.53 03/15/18 **Employer Social Security** Employee Medicare Employee Social Security

Federal ID: 72-1415039

Check Number: Date Paid:

Last Check Date: 02/28/18

Employer Medicare Federal Withholding

1,040.88 243.43 1,040.88 243.42 993.92

IMPORTANT REMINDERS

- *** You are scheduled to report your next payroll on Tue 03/13/18.
- *** In compliance with the Federal Depository rules, your federal deposit frequency is Monthly. Please verify with your deposit frequency information notice from the IRS. If the frequency is different, notify your Payroll Specialist immediately.
- * * * Payments made by EFT must be initiated one day prior to the due date.



0060-0060T846-002-057-1507

0060-T846

IRS

FAMILY VALUES RESOURCE INSTITUTE INC INSTITUTE INC PO BOX 74403 BATON ROUGE LA 70874-4403



0060-0060T846-002-057-1507

0060 0060-T846 Family Values Resource Institute Inc 0060 Run Date 02/26/18 02:07 PM



Transactions Details

Posting Date

02/14/2018

Transaction Date

02/14/2018

Description

PAYCHEX INC.

Transaction Type

Debit

Amount

\$15,600.00

Balance

https://secure.hancockwhitney.com/dBanking/home.do

2/14/2018



0060 0060-T846 Family Values Resource Institute Inc

PAYROLL JOURNAL

| EMPLOYEE NAME | HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS | EIMBURSEM | ENTS & OTHER | PAYMENTS | WITHHOLDINGS | DEDUCTIONS | |
|---|--|-----------|--------------|------------------------|--------------|-------------|--|
| ā | DESCRIPTION RATE | HOURS | EARNINGS | REIMB & OTHER PAYMENTS | | | ALLOCATIONS |
| **** 300 1099
Cenla Pregnancy(IC)
38 | 1099 Misc Comp | | | 1,200,00 | | <i>[6</i>] | osit # 47 |
| | EMPLOYEE TOTAL | SIK. | | 1 200 | | | 55 |
| Crossroads Preg(IC) | | | | 1,200;00 | | | Direct Deposit # 480 Check Amt 0.00 |
| 7 | EMPLOYEE TOTAL | ********* | •••••• | 3000 | | | 32 1,20 |
| Life Choices of(IC) 23 | | | (C) | 3,200:00 | | | Net Pay 1,200,00 Direct Deposit # 481 Check Amt 0,00 |
| | EMPLOYEE TOTAL | ••••• | | 3 2000 | | | - |
| Pregnancy Probl(IC) 22 | | | | 2,200,00 | | | 3,2
sit # 482 |
| ~ | | | | | | | Chkg 2289 2,200.00 |
| Warran Carra | EMPLOYEE TOTAL | | (**10) | 2,200,00 | | | |
| 27 Women's Conter | I OBB MISC COMP | ····· | | 3,200,00 | <u></u> | | pposit # 48
mt |
| | EMPLOYEE TOTAL | | | 3,200,00 | | ***** | Net Pay 3 200 hr |
| Womens Help Center (IC)
28 | 1099 Misc Comp | | | 2,200,00 | | | Direct Deposit # 484 Check Amt 0.00 Chkg 8002 2.200.00 |
| | EMPLOYEE TOTAL | | | 2,200,00 | | ••• | |
| womens New Lite(IC) 24 | 1099 Misc Comp - Mathing & | 1200,00 | 67 | 1,200,00
1,200,00 | | | Direct Deposit # 485 Check Amt 0.00 Chkg 0051 2,400.00 |
| | EMPLOYEE TOTAL | | | 2,400.00 | | ***** | |
| 300 1099 TOTALS 7 Person(s) 7 Transaction(s) | | | | 15,600,00 | | | Check Amt 0.00 Dir Dep 15,600.00 |
| | 300 1099 TOTAL | •••••• | | 15,600.00 | | | Net Pay 15,600.00 |
| COMPANY TOTALS 7 Person(s) 7 Transaction(s) | 1099 Misc Comp | 19 | | 15,600,00 | | | Check Amt 0 00 |
| 9060 9060-1846 Family Values Resource Institute Inc | e Recourse institute ins | | | | | ••• | 10,000.50 |

0050 0050-7846 Family Values Resource Institute Inc. Run Date 02/13/18 04:11 PM

Period Start - End Date 01/01/18 - 01/31/18 Check Date 02/14/18

Payroll Journal Page 1 of 2 PYRJRN

0060 0060-T846 Family Values Resource Institute Inc.

PAYROLL JOURNAL

0060 0060-7846 Family Values Resource Institute Inc. Run Date 02/13/18 04:11 PM (IC) = Independent Contractor EMPLOYEE NAME DESCRIPTION HOURS, EARNINGS, REIMBURSEMENTS & OTHER PAYMENTS COMPANY TOTAL RATE HOURS EARNINGS Period Start - End Date Check Date PAYMENTS 15,600,00 01/01/18 - 01/31/18 02/14/18 WITHHOLDINGS DEDUCTIONS NET PAY ALLOCATIONS Payroll Journal Page 2 of 2 PYRJRN 15,600.00

LOUISIANA Alliance for Life Monthly Report Check List

| Subcontractor | Date
Received | Client | Amount |
|--|------------------|---------------------|-------------|
| CENLA Pregnancy Center Claire Lemoine 318-314-3064 (o) 318-305-7301 (c) | 3/5/18 | 162.5 | \$2,200.00 |
| Crossroads Pregnancy Resource Center Michele Beary 985-446-5004 (o) 985-859-9907 (c) | 3/8/18 | 40 | \$1,200.00 |
| | | | |
| Life Choices of North Central Louisiana Kathleen Richard 318-255-7377 (o) 225-237-1760 (c) | 3/5/18 | 403.5 | \$3,200.00 |
| | | | |
| Pregnancy Problem Center Frances Coleman 225-924-1400 (o) | 2/28/18 | 174 | \$2,200.00 |
| | | | |
| Woman's New Life Center – Baton Rouge
Allison Millet 225-218-4862 (o) 504-301-7573 (c) | 3/5/18 | 12.5 | \$1,200.00 |
| | | | |
| Woman's New Life Center - Metairie Allison Millet 504-469-0212 (o) 504-301-7573 (c) | 3/8/18 | 10.5 | \$1,200.00 |
| | | | |
| Women's Center of Lafayette Michela Camel 337-289-9366 (o) | 2/28/18 | 365 | \$3,200.00 |
| | | | |
| Women's Help Center Barbara Thomas 225-359-9001 (o) 225-324-7013 (c) | 3/6/18 | 189 | \$2,200.00 |
| >>FEBRUARY 2018>> TOTAL | 100 | Dollar Amount >>>>> | \$16,600.00 |

Monthly Report Approval

Month: FEBRUARY 2018

| Subcontractor: Woman's New Life-Baton Rouge | Points Dollar Amount 12.5 \$1,200.00 YES >>>>> \$1,200.00 | Client Service Points / Amount 12.5 Client Service Reports/documentation YES TOTAL Dollar Amount Paid >>>>> |
|---|---|--|
| | ton Rouge | Subcontractor: Woman's New Life-Bay |

APPROVED BY:

Michael Ferris, Administrator

Barbara J. Thomas, Director

Subcontractor Monthly Services Report

| CURCONTRACTOR NAME | : Woman's New Life Center | or Market State | PROGRAM NAME: Louisiana | Alliance for Life |
|--------------------|---------------------------|-------------------|-------------------------|-------------------|
| CONTACT NAME: | Maureen Łavastida | COLUMN TO SERVICE | PROGRAM LOCATION: | Baton Rouge |
| CONTACT TOWN | 225-663-6470 | | SERVICES MONTH: Feb | -18 3/5/2018 |

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Information Forms, and LAL Prenatal/Parenting Education Attendance Forms for reimbursement.

| ELIGIBLE SERVICES (1 point) | Total TANF
Eligible
Clients
Served |
|--|---|
| Pregnancy Testing | 1 |
| New clients who took a pregnancy test
and commit to full-term pregnancy
Pregnancy Retest | |
| Returning clients who retested
and commit to full-term pregnancy
Adoption Education | |
| counseling or informational sessions Male-Adoption Education | |
| Abortion Prevention Education counseling or informational sessions | |
| Male-Abortion Prevention Edu. | |
| Abstinence Education counseling or informational sessions | 1 |
| Male-Abstinence Education | |
| Parenting Information counseling or informational sessions | |
| Male-Parenting Information | C-0344 - C (DR) |

| REFERRALS (1/2 Point) | Total TANF
Eligible
Clients
Served | Referral
Points | REFERRAL
FOLLOW UP
(1 POINT)
TOTAL CLIENTS | |
|--|---|----------------------------|---|-------|
| 1 Adoption Agency | | 0 | | |
| 2 Adult Education/GED | | 0 | | |
| 3 Employment | 1 80 80 | 0 | | |
| 4 Food/Clothing | 0.00 (0.00) | 0 | | |
| 5 Housing | | 0 | | |
| 6 Medicaid (NOT certified app. centers) | 1 | 0.5 | 2 | |
| 7 OB/GYN | | 0 | 2 | |
| 8 PreMarital/Marriage Counseling | | 0 | | |
| 9 Professional Counseling | | 0 | | |
| 10 Rape Crisis Center | | 0 | | |
| 11 Rent/Utilitles | | 0 | | |
| 12 S.NAP/FITAP | | 0 | | |
| 13 STD/HIV Testing | | 0 | | |
| 14 WIC | | 0 | | |
| 15 Public Assistance | | 0 | | |
| OTHER SERVICES (2 points) | Total TANF
Eligible
Clients
Served | Other
Sevices
Points | - 10 | |
| Client Parenting/Prenatal Classes
(#classes x total # participants) | | 0 | | |
| Male Prenatal/Parenting Classes
(Mclasses x total # participants) | | 0 | | |
| Follow Up - Pregnancy Decisions | 3 | 6 | 经数据的关系的政策 | |
| Follow Up - Pregnancy Outcomes | | 0 | MANUAL PROPERTY. | TOTAL |
| TOTAL SERVICES | 6 | | 4 | 10 |
| TOTAL POINTS | 2 | 6.5 | 4 | 12.5 |

| VITAMIN ANG | ELS INVENTORY |
|---------------------|----------------|
| MUST BE COM | PLETED MONTHLY |
| Date | |
| Beginning Inventory | |
| # Clients Served | |
| Amount Distributed | |
| Amount Remaining | |

Services
Reimbursement

Total Monthly Points

1-149 \$1,200

150 - 299 \$2,200

300 + \$3,200

Revised by MAF 6/1/17

LOUISIANNA Alliance for Life Monthly Report Approval

Month:

FEBRUARY 2018

| Subcontractor: CENLA Pregnancy Center | Center | |
|---------------------------------------|-------------------------|---------------|
| | Points | Dollar Amount |
| Client Service Points / Amount | 162.5 | \$2,200.00 |
| Client Service Reports/documentation | YES | |
| | | |
| TOTAL Dollar Amount Paid >>>>> | >>>> | \$2,200.00 |

APPROVED BY:

Michael Fefris, Administrator

Barbara J. Thomas, Director

Subcontractor Monthly Services Report

| STATE OF THE RESERVE OF THE PARTY OF THE PAR | | |
|--|------------------------|---|
| SUBCONTRACTOR NAME: | Cenia Pregnancy Center | PROGRAM NAME: Louisiana Alliance for Life |
| CONTACT NAME: | Claire Lemoine | PROGRAM LOCATION: Alexandria, Louisiana |
| DUONE MUNICEP | 31R-314-3066 | SERVICES MONTH: Feb. 18 DATE: 3/5/2018 |

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Information Forms, and LAL Prenatal/Parenting Education Attendance Forms for relimbursement.

| ELIGIBLE SERVICES (1 point) | Total TANF
Eligible
Clients
Served |
|---|---|
| Pregnancy Testing | 12 |
| New clients who took a pregnancy test and commit to full-term pregnancy | 12 |
| Pregnancy Retest | 0 |
| Returning clients who retested and commit to full-term pregnancy | 0 |
| Adoption Education counseling or informational sessions | 11 |
| Male-Adoption Education | 3 |
| Abortion Prevention Education counseling or Informational sessions | 11 |
| Male-Abortion Prevention Edu. | 4 |
| Abstinence Education counseling or informational sessions | 3 |
| Male-Abstinence Education | 1 |
| Parenting Information counseling or informational sessions | 6 |
| Male-Parenting Information | 6 |

| Male-Parenting Information | 6 | | | |
|--|---|----------------------------|---|-------|
| REFERRALS (1/2 Point) | Total TANF
Eligible
Clients
Served | Referral
Points | REFERRAL
FOLLOW UP
(1 POINT)
TOTAL CLIENTS | |
| 1 Adoption Agency | 0 | 0 | | |
| 2 Adult Education/GED | 1 | 0.5 | | |
| 3 Employment | 2 | 1 | 1 | |
| 4 Food/Clothing | 5 | 2.5 | 3 | |
| 5 Housing | 1 | 0.5 | | |
| 6 Medicaid (NOT certified app. centers) | 9 | 4.5 | 6 | |
| 7 OB/GYN | 11 | 5.5 | 6 | |
| 8 PreMarital/Marriage Counseling | 0 | 0 | | |
| 9 Professional Counseling | 0 | 0 | 0 | |
| 10 Rape Crisis Center | 0 | 0 | 1000 | |
| 11 Rent/Utilities | 0 | 0 | | |
| 12 SNAP/FITAP | 10 | 5 | 5 | |
| 13 STD/HIV Testing | 0 | 0 | 0 | |
| 14 WIC | 11 | 5.5 | 7 | |
| 15 Public Assistance | 5 | 2.5 | 2 | |
| OTHER SERVICES (2 points) | Total YANF
Eligible
Clients
Served | Other
Sevices
Points | | |
| Client Parenting/Prenatal Classes
(#classes x total # participants) | 9 | 18 | Sea Daniel | |
| Male Prenatal/Parenting Classes (#classes x total # participants) | 3 | 6 | | |
| Follow Up - Pregnancy Decisions | 6 | 12 | 的复数形式和2000年 | |
| Follow Up - Pregnancy Outcomes | | 0 | 11年第16年7月6日 | TOTAL |
| TOTAL SERVICES | 142 | | 30 | 172 |
| TOTAL POINTS | 69 | 63.5 | 30 | 162.5 |

| T | ELS INVENTORY PLETED MONTHLY |
|---------------------|------------------------------|
| Date Date | Feb-18 |
| Beginning Inventory | 66 |
| # Clients Served | 12 |
| Amount Distributed | 24 |
| Amount Remaining | 42 |

Services
Reimbursement

Total Monthly Points

1 - 149 \$1,200

150 - 299 \$2,200

300 + \$3,200

Revised by MAF 6/1/17

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

Subcontractor: Cenia Pregnancy Center Services Month: 1-Feb Date: 3/5/2018

PARENTING/PRENATAL CLASSES Please attach all corresponding LAL Prenatal/Parenting Education Attendance forms (group & individual) For individual sessions, use the last column to indicate the chart # of the TANF eligible client's participation. For group sessions, use the last column to enter the total number of individuals who participated in the class.

| Date | Topic | Chart # or Total
#of TANF Eligible
Participants | Total #Male
Partner/Spouse
Participants |
|-----------|---|---|---|
| 2/1/2018 | The First Years | 1 | chart # 4 |
| 2/15/2018 | Parenting with Respect | 1 | chart # 4 |
| 2/21/2018 | Ten Things Every Child Needs-Talk, Play, Music, and Reading | 1 | chart # 4 |
| 2/28/2018 | Understanding your Baby's Cry, Part 2 | 1 | chart # 4 |
| 2/5/2018 | Fetal Development | 1 (+ MP) | chart # 5 |
| 2/19/2018 | Nutrition | 1 (+ MP) | chart # 5 |
| 2/12/2018 | Pregnancy and Child Care Discussion | 1 | chart # 10 |
| 2/12/2018 | Understanding your Baby's Cry, Part 1 | 1 | chart # 12 |
| 2/19/2018 | Fetal Development | 1 (+ MP) | chart # 12 |
| | | | |
| | # | | |
| | | | |
| | TOTALS | | |

Monthly Report Approval Alliance for life

FEBRUARY 2018

| \$1,200.00 | >>>> | TOTAL Dollar Amount Paid >>>> |
|---------------|----------|---|
| | | |
| | YES | Client Service Reports/documentation |
| \$1,200.00 | 40 | Client Service Points / Amount |
| Dollar Amount | Points | |
| ource Center | ancy Res | Subcontractor: Crossroads Pregnancy Resource Center |

Barbara^l J. Thomas, Director

Ferris, Administrator

APPROVED BY:

Subcontractor Monthly Services Report

SUBCONTRACTOR NAME: Crossroads Pregnancy Resource Center PROGRAM NAME: Louisiana Alliance for Life
CONTACT NAME: Michael Beary PROGRAM LOCATION: Thibodaux, LA
PHONE NUMBER: 985-446-5004 SERVICES MONTH: February DATE: 3/8/2018

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Information Forms, and LAL Prenatal/Parenting Education Attendance Forms for reimbursement.

| | ELIGIBLE SERVICES (1 point) | Eligible
Clients
Served |
|---|--|-------------------------------|
| and commit to full-term pregnancy Pregnancy Retest O Returning clients who retested and commit to full-term pregnancy Adoption Education counseling or informational sessions Male-Adoption Education 1 Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. 1 Abstinence Education counseling or informational sessions Male-Abortion Prevention Edu. 1 Abstinence Education counseling or informational sessions Male-Abstinence Education 1 Parenting Information counseling or informational sessions 4 | Pregnancy Testing | 4 |
| Pregnancy Retest 0 Returning clients who retested 0 and commit to full-term pregnancy Adoption Education 1 counseling or informational sessions 1 Abortion Prevention Education 1 Abortion Prevention Education 1 counseling or informational sessions 1 Male-Abortion Prevention Edu. 1 Abstinence Education 1 Counseling or informational sessions 1 Abortion Prevention Edu. 1 Abstinence Education 1 Counseling or informational sessions 1 Parenting Information 1 Counseling or information 1 Parenting Information 3 Counseling or informational sessions 1 | l l | 4 |
| and commit to full-term pregnancy Adoption Education counseling or informational sessions Male-Adoption Education Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. Abstinence Education counseling or informational sessions Male-Abstinence Education 4 Are a sessions Male-Abstinence Education 1 Parenting Information counseling or informational sessions 4 | | 0 |
| counseling or informational sessions Male-Adoption Education Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. Abstinence Education counseling or informational sessions Male-Abstinence Education 1 Parenting Information counseling or informational sessions 4 | State of the second sec | 0 |
| Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. 1 Abstinence Education counseling or informational sessions Male-Abstinence Education 1 Parenting Information counseling or informational sessions 4 counseling or information 4 | | 1 |
| counseling or Informational sessions Male-Abortion Prevention Edu. 1 Abstinence Education 4 counseling or Informational sessions Male-Abstinence Education 1 Parenting Information 4 counseling or Informational sessions | Male-Adoption Education | 1 |
| Male-Abortion Prevention Edu. 1 Abstinence Education 4 counseling or informational sessions Male-Abstinence Education 1 Parenting Information 4 counseling or informational sessions | | 1 |
| counseling or informational sessions Maie-Abstinence Education 1 Parenting Information 4 counseling or informational sessions | Male-Abortion Prevention Edu. | 1 |
| Male-Abstinence Education 1 Parenting Information 4 counseling or informational sessions | | 4 |
| counseling or informational sessions | | 1 |
| | | 4 |
| | | 1 |

| counseling or informational sessions | 5.0 | | | |
|--|---|----------------------------|--|-----------------|
| Male-Parenting Information | 1 | | | |
| REFERRALS (1/2 Point) | Total TANF
Eligible
Clients
Served | Referral
Points | REFERRAL FOLLOW UP (1 POINT) TOTAL CLIENTS | |
| 1 Adoption Agency | 1 | 0.5 | | |
| 2 Adult Education/GED | 2 | 1 | | |
| 3 Employment | 4 | 2 | | |
| 4 Food/Clothing | 2 | 1 | | |
| 5 Housing | 1 | 0.5 | | |
| 6 Medicaid (NOT certified app. centers) | 3 | 1.5 | | |
| 7 OB/GYN | 4 | 2 | | |
| 8 PreMarital/Marriage Counseling | 1 | 0.5 | | |
| 9 Professional Counseling | 1 | 0.5 | | |
| 10 Rape Crisis Center | 0 | 0 | | |
| 11 Rent/Utilities | 0 | 0 | | |
| 12 SNAP/FITAP | 0 | 0 | | |
| 13 STD/HIV Testing | 1 | 0.5 | | |
| 14 WIC | 3 | 1.5 | | |
| 15 Public Assistance | 1 | 0.5 | | |
| OTHER SERVICES (2 points) | Total TANF
Eligible
Clients
Served | Other
Sevices
Points | | |
| Client Parenting/Prenatal Classes
(#classes x total # participants) | 0 | 0 | | |
| Male Prenatal/Parenting Classes
(#classes x total # participants) | 0 | 0 | | |
| Follow Up - Pregnancy Decisions | 3 | 6 | 文章的图形 | |
| Follow Up - Pregnancy Outcomes | 0 | 0 | Book of the second | TOTAL |
| TOTAL SERVICES | 49 | 可能以對於物質 | 0 | 49 |
| | | | | SCHOOL STATE OF |

TOTAL POINTS

| VITAMIN ANGELS INVENTORY MUST BE COMPLETED MONTHLY | |
|--|----------|
| Date | 3/8/2018 |
| Beginning Inventory | 70 |
| # Clients Served | 1 |
| Amount Distributed | 2 |
| Amount Remaining | 68 |

| Servi | ces |
|--------------------------------------|---------------------------|
| Reimbursem | ent Model |
| Total Month | nly Points |
| SALES AND DESCRIPTION OF THE PERSON. | CONTRACTOR OF THE PERSON. |
| 1 - 149 | \$1,200 |
| 1 - 149
150 - 299 | \$1,200
\$2,200 |

40

0

Revised by MAF 6/1/1

LOUISIANNA Alliance for Life Monthly Report Approval

Month: F

FEBRUARY 2018

| Subcontractor: Pregnancy Problem Center | n Center | |
|---|----------|---------------|
| | Points | Dollar Amount |
| Client Service Points / Amount | 174 | \$2,200.00 |
| Client Service Reports/documentation | YES | |
| | | |
| TOTAL Dollar Amount Paid >>>>> | <<<< | \$2,200.00 |

APPROVED BY:

Michael Ferris, Administrator

Barbara J. Thomas, Director

| molifermolari ese 2 shaqood sepimos denits ta ta anni anni | |
|--|---|
| ZERVICES MONTH: Feb-18 DATE: ZIZBIZULE | PHONE NUMBER: 225-924-1400 |
| Stocy Serve | CONTACT WAME: Frances Broussard |
| PROGRAM AAME: Louisiana Autaines for the | SUBCONTRACTOR NAME: Family Life Rederation/Pregnancy Problem Center |

Subcontractor Monthly Services Report

Forms, and LAL Prenatal/Parenting Education Attendance Forms for reimbursement. Please submit supporting client services documentation which includes relevant LAL Client Services Records, C

| 9 | T TOTAL TOTAL STREET |
|---------------|----------------------|
| , | basudistaid snuomA |
| ε | # Clients Served |
| 45 | Beginning Inventory |
| 2/1/2018 | Site |
| VETED MONTHLY | MUST BE COMP |
| ELS INVENTORY | IDNA NIMATIV |

| 6E
9 | bəsudinzəld snuomA
gninisməsi snuomA |
|-------------|---|
| ξ | # Clients Served |
| 45 | Beginning Inventory |
| 2/1/2018 | elect |
| TED MONTHLY | MUST BE COMPLE |
| LNOTNEAMIC | VITAMIN ANGEL |

| 26 | SECTION AND PROPERTY. | CA | 237IVG32 IATOT |
|---|--|--|---|
| 5285 93 1409-927 | ZI | 9 | Follow Up - Pregnancy Outcomes |
| ar sett dette de | 24 | 75 | Follow Up - Pregnancy Decisions |
| | 7 | ī | Male Prenatal/Parenting Classes
(#closses x total # participants) |
| | 30 | SI | Client Parenting/Prenatal Classes
(#closses x total # porticipants) |
| | Other
Sevices
Points | HINAT ISOT
eldigiii
stinaiiD
bavia2 | (S bojuts) OTHER SERVICES |
| | 0 | | 15 Public Assistance |
| 8 | 7 | Þ | 14 MIC |
| 3 | 7 | 7 | 13 STD/HIV Testing |
| | 0 | | TS SNAP/FITPP |
| | 0 | | 11 Rent/Utilities |
| | 0 | | TO Rape Crisis Center |
| | 0 | | 9 Professional Counseling |
| | 0 | | 8 PreMarital/Marriage Counseling |
| 8 | 5'T | ε | J OB/CAM |
| | 5'T | Ε | 6 Medicald (NOT certified app. centers) |
| | 0 | | SuizuoH 2 |
| | 0 | | 4 Food/Clothing |
| | 0 | | 3 Employment |
| τ | 0 | | 2 Adult Education/GED |
| | 0 | | 1 Adoption Agency |
| TOTAL CLIENTS (1 POINT) (2 POINT) (2 POINT) | lernələЯ
zənioq | Total Tawl? Single charts charts bevrac | REFERRALS (1/2 Point) |
| | Control of the Contro | | Male-Parenting Information |
| | | b | Parenting Informational sessions |
| | | | |
| | | Þ | counseling or informational sessions |
| | | Þ | Abstinence Education
courseling or informational sessions
Male-abstinence Education |

counseling or informational sessions Male-Abortion Prevention Edu.

Male-Adoption Education Abortion Prevention Education

and commit to full-term pregnancy Adoption Education counseling or informational sessions

and commit to full-term pregnancy New clients who took a pregnancy test

ELIGIBLE SERVICES (1 point)

Pregnancy Retest

Pregnancy Testing

| \$3,200 | + 00€ |
|------------|-------------------|
| | 120 - 5 88 |
| \$1,200 | 641 - I |
| stnio9 ylr | InoM leto1 |
| quama | Reimburs |
| sac | Servi |

| 7/I | LZ | SŁ | 72 | STNIO9 JATOT |
|-------|-----------------|-----|-----|--------------------------------|
| 66 | LZ | 100 | 7.5 | TOTAL SERVICES |
| JATOT | 医肾马科 计分钟机 | 75 | 9 | Follow Up - Pregnancy Outcomes |
| | 4000 FEMARES 46 | 24 | ΖŢ | ollow Up - Pregnancy Decisions |

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

Subcontractor: Family Life Federation/Pregnancy Probl Services Month: Feb.2018 Date: 02/28.2018

PARENTING/PRENATAL CLASSES

| slsM# lstoT | Chart # or Total | | |
|-------------------------------|----------------------------------|---------------------------------------|-----------|
| Partner/Spouse
strictional | #of TANF Eligible
strissional | oiqoT | Date |
| | (466) I | Bonding With Your Unborn Child 2.4 | 2/12/2018 |
| | (\$66) T | Getting Ready For Baby 4.2 | 2/21/2018 |
| | ₱66) I | What to Expect Labor & Delivery 11.2 | 8102/72/2 |
| τ | (1001) | Understanding Baby's Cry 3.5 | 2/5/2018 |
| | 1001)1 | Ultrasounds:Windows to the Womb (2.2) | 2/5/2018 |
| | τοοτ) τ | Eye Contact 4.3 | 2/14/2018 |
| | 1(1001)1 | Having Emotionally Heathly Kids | 2/26/2018 |
| e | 1 (418) | 8.1 Nutrition 1.3 | 2/5/2018 |
| | (STOT) T | First Years Last Forever | 2/12/2018 |
| | (\$101) [| First Years Last Forever | 2/14/2018 |
| | (9101) 1 | First Years Last Forever | 2/21/2018 |
| | (6001) 1 | E.1 Nutrition 1.3 | 2/5/2018 |
| | (6001) 1 | Your Developing Baby | 2/14/2018 |
| | (\(\tau\tau\tau\) | First Years Last Forever | 2\28\2018 |
| | (0101) 1 | (0101) E.1 noitinuM | 2/12/2018 |

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Monthly Report Approval

Month: FEBRUARY 2018

| TOTAL Dollar Amount Paid >>>>> | | Client Service Reports/documentation | Client Service Points / Amount | | Subcontractor: Women's Center of Lafayette |
|--------------------------------|---|--------------------------------------|--------------------------------|---------------|--|
| >>>>> | , | YES | 365 | Points | f Lafayet |
| \$3,200.00 | | | \$3,200.00 | Dollar Amount | 6 |

APPROVED BY:

Michael Ferris, Administrator

Barbara J. Thomas, Director

Subcontractor Monthly Services Report

| SUBCONTRACTOR NAME: The Womens Center of Lafayette | PROGRAM NAME: Louisiana Alliance | for Life |
|--|----------------------------------|---------------------------------|
| CONTACT NAME: Lecretia Petin | PROGRAM LOCATION: | 1931 Jefferson St Lafayette, LA |
| | SERVICES MONTH Feb-18 | OATE: 2/28/2018 |

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Information Forms, and LAL Prenatal/Parenting Education Attendance Forms for reimbursement.

| and commit to full-term pregnancy Pregnancy Retest 2 Returning clients who retested and commit to full-term pregnancy Adoption Education 26 Counseling or informational sessions Male-Adoption Education 4 Counseling or informational sessions Male-Abortion Prevention Education 27 Counseling or informational sessions Male-Abortion Prevention Edu. 5 Abstinence Education 27 Counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 Counseling or informational sessions 26 | ELIGIBLE SERVICES (1 point) | Eligible
Clients
Served |
|--|---|-------------------------------|
| and commit to full-term pregnancy Pregnancy Retest 2 Returning clients who retested and commit to full-term pregnancy Adoption Education 26 Counseling or informational sessions Male-Adoption Education 4 Counseling or informational sessions Male-Abortion Prevention Education 27 Counseling or informational sessions Male-Abortion Prevention Edu. 5 Abstinence Education 27 Counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 Counseling or informational sessions 26 | Pregnancy Testing | 32 |
| Pregnancy Retest 2 Returning clients who retested and commit to full-term pregnancy Adoption Education 26 Counseling or informational sessions Male-Adoption Education 4 Counseling or informational sessions Male-Abortion Prevention Education 27 Counseling or informational sessions Male-Abortion Prevention Edu. 0 Abstinence Education 27 Counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 Counseling or Informational sessions | New clients who took a pregnancy test and commit to full-term pregnancy | 27 |
| and commit to full-term pregnancy Adoption Education counseling or informational sessions Male-Adoption Education Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. Abstinence Education counseling or informational sessions Male-Abstinence Education 5 Parenting Information counseling or informational sessions 26 | Pregnancy Retest | 2 |
| counseling or informational sessions Male-Adoption Education 6 Abortion Prevention Education 4 counseling or informational sessions Male-Abortion Prevention Edu. 0 Abstinence Education 27 counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 counseling or informational sessions 26 counseling or information 26 | Returning clients who retested and commit to full-term pregnancy | 0 |
| Abortion Prevention Education counseling or informational sessions Male-Abortion Prevention Edu. 0 Abstinence Education counseling or informational sessions Male-Abstinence Education 5 Parenting Information counseling or informational sessions 26 | Adoption Education counseling or informational sessions | 26 |
| counseling or informational sessions Male-Abortion Prevention Edu. O Abstinence Education counseling or informational sessions Male-Abstinence Education 5 Parenting Information counseling or Informational sessions 26 | Male-Adoption Education | 6 |
| Abstinence Education 27 counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 counseling or informational sessions | Abortion Prevention Education counseling or informational sessions | 4 |
| counseling or informational sessions Male-Abstinence Education 5 Parenting Information 26 counseling or informational sessions | Male-Abortion Prevention Edu. | 0 |
| Parenting Information 26 counseling or informational sessions | Abstinence Education counseling or informational sessions | 27 |
| counseling or informational sessions | Male-Abstinence Education | 5 |
| Male-Parenting Information 6 | Parenting Information counseling or Informational sessions | 26 |
| | Male-Parenting information | 6 |

| Male-Parenting Information | 6 | 4 | |
|--|---|----------------------------|---|
| REFERRALS (1/2 Point) | Total TANF
Eligible
Clients
Served | Referral
Points | REFERRAL
FOLLOW UP
(1 POINT)
TOTAL CLIENTS |
| 1 Adoption Agency | 1 | 0.5 | |
| 2 Adult Education/GED | 0 | 0 | 10 W = |
| 3 Employment | 0 | 0 | |
| 4 Food/Clothing | 17 | 8.5 | 18 |
| 5 Housing | 4 | 2 | 2 |
| 6 Medicaid (NOT certified app. centers) | 7 | 3.5 | 3 |
| 7 OB/GYN | 7 | 3.5 | 4 |
| 8 PreMarital/Marriage Counseling | 4 | 2 | |
| 9 Professional Counseling | 4 | 2 | |
| 10 Rape Crisis Center | 0 | 0 | |
| 11 Rent/Utilities | 0 | 0 | |
| 12 SNAP/FITAP | 11 | 5.5 | |
| 13 STD/HIV Testing | 19 | 9.5 | |
| 14 WIC | 16 | 8 | 2 |
| 15 Public Assistance | 0 | 0 | |
| OTHER SERVICES
(2 points) | Total TANF
Eligible
Clients
Served | Other
Sevices
Points | |
| Client Parenting/Prenatal Classes
(#classes x total # participants) | 5 | 10 | |
| Male Prenatal/Parenting Classes
(Mclasses x total # participants) | | 0 | |
| Follow Up - Pregnancy Decisions | 27 | 54 | 工程的基础是对 对 |
| Follow Up - Pregnancy Outcomes | 33 | 66 | 2000年的5月15日 |
| TOTAL SERVICES | 316 | Contract Co. | 29 |
| TOTAL POINTS | 161 | 175 | 29 |

| VITAMIN ANGE | LS INVENTORY |
|---------------------|--------------|
| Date | 2/28/2018 |
| Beginning Inventory | 43 |
| # Clients Served | 27 |
| Amount Distributed | 47 |
| Amount Remaining | 96 |

Services
Reimbursement

Total Monthly Points

1 - 149 \$1,200

150 - 299 \$2,200

300 + \$3,200

TOTAL

345 365

Revised by MAF 6/1/17

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

Subcontractor: The Womens Center of Lafayette Services Month: February Date: 28-Feb-18

| For individual sessions . Use | PARENTING/PRENATAL CL
rresponding LAL Prenatal/Parenting Education
e the last column to indicate the chart # of the
last column to enter the total number of indicate | Attendance
TANF eligibi | e client's particip | ation. For group |
|-------------------------------|--|----------------------------|---|---|
| Date | Topic | | Chart # or Total
fof TANF Eligible
Participants | Total #Male
Partner/Spouse
Participants |
| 2/9/2018 | Theology of the Body | | 5 | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 25 | | | | |
| 0 | | TOTALS | | |

LOUISIANA Alliance for Life Monthly Report Approval

Month: FE

FEBRUARY 2018

| Subcontractor: Woman's New Life - Metairie | - Metairie | 6 |
|--|------------|---------------|
| | Points | Dollar Amount |
| Client Service Points / Amount | 10.5 | \$1,200.00 |
| Client Service Reports/documentation | YES | |
| | | |
| TOTAL Dollar Amount Paid >>>>> | ^ | \$1,200.00 |

APPROVED BY:

Michael Ferris, Administrator

Barbard J. Thomas, Director

Subcontractor Monthly Services Report

| 3/8/2018 | :FIAG | 81-də1 | SEKAKES WORLH: | 建筑设置 | 200-960-105 | HONE NOWBEK: |
|----------|-------|---------------|-------------------|-------------------------|-----------------|--------------|
| Means | MON C | Homes and the | PROGRAM LOCATION: | ARRIVA SOME SERVICE AND | Sellison Millet | SMAN TOATHO |

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Informati⁸ in Forms, and LAL Prenatal/Paxenting Education Attendance Forms for reimbursement.

| | vaiglemes truomà | | | |
|---------------------------|---------------------|--|--|--|
| | betudinteld touomA | | | |
| | # Clients Served | | | |
| | Peginning Inventory | | | |
| | əteO | | | |
| MUST BE COMPLETED MONTHLY | | | | |
| YAOTNAVNI 213 | DNA NIMATIV | | | |
| | | | | |

| SERVICE CONTRACTOR | 0 | | Male Prenatal/Parenting Classes |
|---|----------------------------|-----------------------------------|--|
| | 0 | | Client Parenting/Prenatal Classes
(#classes x total # participants) |
| | Other
Sevices
Points | Total TANH Eligible Clents Served | OTHER SERVICES (2 points) |
| | 0 | | 35 Public Assistance |
| I | E | 7 | 74 MIC |
| | 0 | | 13 STD/HIV Testing |
| | 0 | | 12 SNAP/FITAP |
| | 0 | | 11 Rent/Utilities |
| | 0 | | 10 Rape Crisis Center |
| | 0 | | 9 Professional Counseling |
| | 0 | | 8 PreMarital/Marriage Counseling |
| ī | 5.0 | I | 7 OB/GYN |
| ī | 0 | | 6 Medicaid (NOT certified app. centers) |
| | 0 | | SuizvoH 2 |
| Table 100 T | 0 | | 4 Food/Clothing |
| | 0 | | 3 Employment |
| | 0 | | 2 Adult Education/GED |
| - A LANGER | 0 | Section Contraction | 1 Adoption Agency |
| REFERENT
(1, POINT)
TOTAL CLIENTS | Referral
Proints | Total TANF Eligible Clients Davie | REFERRALS (1/2 Point) |
| | | | noitemnoini gnimate4-sisM |
| | | 7 | Parenting Information
courseling or informational sessions |
| | | | Male-Abstinence Education |
| | | 7 | Abstinence Education counseling or informational sessions |
| | | | Male-Abortion Prevention Edu. |
| | | | counseling or informational sessions |

7

powes

Returning clients who retested and commit to full-term pregnancy Adoption Education courseling or informational sessions Male-Adoption Education Able-Adoption Education

and commit to full-term pregnancy test

ETICIBIE ZEKNICES (1 bojut)

Pregnancy Retest

Pregnancy Testing

| \$3,200 | + 008 | | | | | |
|------------|----------------------|--|--|--|--|--|
| | T20 - 588 | | | | | |
| \$1,200 | 1 - 146 | | | | | |
| striog yla | stnio9 yldtnoM lstoT | | | | | |
| tnama | Reimburs | | | | | |
| sao | SELVI | | | | | |

| 20.5 | ε | . S'T | 9 | ZTUIO9 JATOT |
|-------|----------------|-------|---|-----------------------------------|
| 12 | ε | | 6 | LOTAL SERVICES |
| JATOT | 2.00mm (150mm) | 0 | | Follow Up - Pregnancy Outcomes |
| | Scarranio Carr | 0 | | Follow Up - Pregnancy Decisions |
| | | 0 | | (#closses x tatal # participants) |

Monthly Report Approval

Month: FEBRUARY 2018

| TOTAL Dollar Amount Paid >>>>> | Client Service Reports/documentation | Client Service Points / Amount | | Subcontractor: Women's Help Center |
|--------------------------------|--------------------------------------|--------------------------------|---------------|------------------------------------|
| >>>>> | YES | 189 | Points | nter |
| \$2,200.00 | | \$2,200.00 | Dollar Amount | |

APPROVED BY:

Michael Ferris, Administrator

Barbarh J. Thomas, Director

Subcontractor Monthly Services Report

| SUBCONTRACTOR NAME: Women's Help Center | | PROGRAM NAME: Louisiana Alliance for Life | | | |
|---|--------------|---|--|--|--|
| CONTACT NAME: | Pat Brown | PROGRAM LOCATION: Baton Rouge | | | |
| PHONE NUMBER: | 225-359-9001 | SERVICES MONTH: Feb-18 DATE: 3/6/2018 | | | |

Please submit supporting client services documentation which includes relevant LAL Client Services Records, Case Information Forms, and LAL Prenatal/Parenting Education Attendance Forms for reimbursement.

| ELIGIBLE SERVICES (1 point) | Total TANF
Eligible
Clients
Served |
|---|---|
| Pregnancy Testing | 16 |
| New clients who took a pregnancy test and commit to full-term pregnancy | 14 |
| Pregnancy Retest | |
| Returning clients who retested and commit to full-term pregnancy | |
| Adoption Education counseling or Informational sessions | 15 |
| Male-Adoption Education | |
| Abortion Prevention Education counseling or informational sessions | 16 |
| Male-Abortion Prevention Edu. | |
| Abstinence Education counseling or informational sessions | 15 |
| Male-Abstinence Education | |
| Parenting Information counseling or informational sessions | 12 |
| Male-Parenting Information | |

| REFERRALS (1/2 Point) | Total TANF
Eligible
Clients
Served | Referral
Points | REFERRAL FOLLOW UP (1 POINT) TOTAL CLIENTS | |
|--|---|----------------------------|--|-------|
| 1 Adoption Agency | | 0 | | |
| 2 Adult Education/GED | 1 | 0.5 | | |
| 3 Employment | | 0 | | |
| 4 Food/Clothing | | 0 | | |
| 5 Housing | | 0 | | |
| 6 Medicaid (NOT certified app. centers) | | 0 | | |
| 7 OB/GYN | 12 | 6 | 10 | |
| 8 PreMarital/Marriage Counseling | 1 | 0.5 | 4 | |
| 9 Professional Counseling | | 0 | | |
| 10 Rape Crisis Center | | 0 | | |
| 11 Rent/Utilities | | 0 | | |
| 12 SNAP/FITAP | | 0 | | |
| 13 STD/HIV Testing | 4 | 2 | 5 | |
| 14 WIC | 10 | 5 | 8 | |
| 15 Public Assistance | | 0 | 2012-0-78 | |
| OTHER SERVICES (2 points) | Total TANF
Eligible
Clients
Served | Other
Sevices
Points | | |
| Client Parenting/Prenatal Classes
(#closses x total # participants) | 18 | 36 | | |
| Male Prenatal/Parenting Classes
(#classes x total # participants) | | 0 | | |
| Follow Up - Pregnancy Decisions | 6 | 12 | THE PARTY NAMED AND | |
| Follow Up - Pregnancy Outcomes | 6 | 12 | | TOTAL |
| TOTAL SERVICES | 146 | | 27 | 173 |
| TOTAL POINTS | 88 | 74 | 27 | 189 |

| VITAMIN ANGELS INVENTORY | | | | |
|--------------------------|----------------|--|--|--|
| MUST BE COM | PLETED MONTHLY | | | |
| Date | | | | |
| Beginning Inventory | | | | |
| # Clients Served | | | | |
| Amount Distributed | | | | |
| Amount Remaining | | | | |

Services
Reimbursement
Total Monthly Points
1-149 \$1,200
150 - 299 \$2,200
300 + \$3,200

Revised by MAF 4/12/17

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

Subcontractor: Women's Help Center Services Month: 1-Feb Date: March 5 2017

PARENTING/PRENATAL CLASSES

Please attach all corresponding LAL Prenatal/Parenting Education Attendance forms (group & individual)

For <u>individual sessions</u>, use the last column to indicate the chart # of the TANF eligible client's participation. For <u>group</u>

<u>sessions</u>, use the last column to enter the total number of individuals who participated in the class.

| Date | Topic | Chart # or Total
#of TANF Eligible
Participants | Total #Male
Partner/Spouse
Participants |
|-----------|---------------------------------|---|---|
| 2/26/2018 | The Second Trimester 3.1 | 17-12585 | |
| 2/27/2018 | Sids 3.4 17-12585 | | |
| 2/27/2018 | Shaken Baby Syndrone 8.5 | 17-12585 | |
| 2/27/2018 | The Second Trimester 3.1 | 18-12631 | |
| 2/6/2018 | Fetal Development 1.5 | 17-12595 | |
| 2/6/2018 | Your Changing Body 2.5 | 17-12595 | |
| 2/19/2018 | | | |
| 2/26/2018 | | | |
| 2/26/2018 | Shaken Baby Syndrone 8.5 | 17-12595 | |
| 2/8/2018 | Prenatal Care 1.2 | 18-12603 | |
| 2/8/2018 | Eating for two 1.3 | 18-12603 | |
| 2/13/2018 | What's Safe What's Not 2.3 | 18-12603 | |
| 2/21/2018 | Your Changing Body 1.5 18-12603 | | |
| 2/21/2018 | | | |
| 2/28/2018 | Second Trimester 3.1 | 18-12603 | |
| 2/5/2018 | The First Trimester | 16-12177 | |
| | TC | TALS | |

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

Subcontractor: Women's Help Center Services Month: 1-Feb Date: March 5 2017

| PARENTING/PRENATAL CLASSES Please attach all corresponding LAL Prenatal/Parenting Education Attendance forms (group & individual) For individual sessions, use the last column to indicate the chart # of the TANF eligible client's participation. For group sessions, use the last column to enter the total number of individuals who participated in the class. | | | | | |
|---|--------------------|-------|---|---|--|
| Date | Topic | #of | art # or Total
TANF Eligible
Participants | Total #Male
Partner/Spouse
Participants | |
| 2/7/2018 | Prenatal Care 1.2 | | 16-12177 | | |
| 2/7/2018 | Eating for two 1.2 | : | 16-12177 | | |
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| | | OTALS | | | |

LOUISIANNA Alliance for life Monthly Report Approval

Month:

FEBRUARY 2018

| Subcontractor: Life Choices of NC Louisiana | Louisian | 8 |
|---|----------|--|
| | Points | Dollar Amount |
| Client Service Points / Amount | 403.5 | \$3,200.00 |
| Client Service Reports/documentation | YES | The state of the s |
| | 48 | |
| TOTAL Dollar Amount Paid >>>>> | <<<< | \$3,200.00 |

APPROVED BY:

Michael Ferris, Administrator

Barbara J. Thomas, Dire

SUBCONTRACTOR NAME: Life Choices of North Central Louisiana PROGRAM NAME: Louisiana Alliance for Life Contract NAME: Alliance for Life Contract NAME: Ruston, LA

Subcontractor Monthly Services Report **LOUISIANA ALLIANCE FOR LIFE**

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|-----------------------|---------------|--|--|---|-----------------|------------------|
| THE PURIS SHIP IN THE | uuouu asen 's | ursement. | dmiss tot amot sonebna | ervices documentation which include
Prenatal/Parenting Education Att | s ways Suproddr | e simulus assaid |
| 8T0Z/S/E | DATE | Feb-18 | HUNOW SEDIANES | | //EL-557-81E | PHONE NUMBER: |
| | | Committee in the Committee of the Commit | and the same of th | AACUAT (D. 19) | DON HOSHITEN | TIMINA LINCO |

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|---------------------------|---------------------|--|--|--|
| | betudintal@ tranomA | | | |
| | # Clients Served | | | |
| | Peginning Inventory | | | |
| e/u | Date | | | |
| MUST BE COMPLETED MONTHLY | | | | |
| VITAMIN ANGELS INVENTORY | | | | |
| | | | | |

| bb | 220.5 | 6ET | STMIO9 JATOT |
|----------------------------------|--------------------|--|---|
| 77 | 世代的の問題が | 916 | TOTAL SERVICES |
| 刘等 ,它是原用于1988年 | ZS | 97 | eollow Up - Pregnancy Outcomes |
| 7.04 THE PROPERTY. | 97 | 13 | ollow Up - Pregnancy Decisions |
| | ZÞ | 1.5 | Naie Prenatal/Parenting Classes
#closses x total # porticiponts) |
| 1944 | 95 | 82 | Client Parenting/Prenatal Classes
#dosses x total # porticiponts) |
| | Sevices
Points | Total Tale | (S bojuss) |
| | S.0 | ī | 15 Public Assistance |
| 9 | 9 | ZT | rd MIC |
| II | 8 | 9T | SatizesT VIH\QT2 E. |
| | τ | 7 | 4ATT1/4AN2 SI |
| | 0 | | L1 Rent/Utilities |
| | 0 | | 10 Rape Crisis Center |
| | S'T | ε | Professional Counseling |
| | 2.1 | ε | PreMarital/Marriage Counseling |
| ET | 5'6 | 6T | NA9/80 |
| 6 | 8 | 9T | Medicald (NOT certified opp. centers) |
| ī | 7 | Þ | SujsnoH 9 |
| ī | 2.5 | S | t Food/Clothing |
| 7 | 2.5 | S | s Employment |
| τ | S'T | ε | Adult Education/GED |
| | 0 | | I Adoption Agency |
| REFERENT FOLLOW
TOTAL CLIENTS | Referral
strioq | Total TANIF
Eligible
Clients
bovis? | REFERRALS (1/2 Point) |
| | | OT | Male-Parenting Information |
| | | 24 | Farenting Informational sessions courseling or informational sessions |
| | | 7 | Male-Abstinence Education |
| | | Ζī | Abstinence Education counseling or informational sessions |
| | | 7 | Male-Abortion Prevention Edu. |
| | | | counseling or informational sessions |
| | | 1 tr | |

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Abortion Prevention Education

and commit to full-term pregnancy Adoption Education

and commit to full-term pregnancy

New clients who took a pregnancy test

Beturning clients who retested

Pregnancy Retest

Pregnancy Testing

Male-Adoption Education counseling or informational sessions

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|------------|-------------|
| 22,200 | T20 - 588 |
| 00Z'T\$ | 67T - T |
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| tuamas | Reimburs |
| səc | Servi |

| 403.5 | bb | 220.5 | 6ET | STNIO9 JATOT |
|-------|--|----------|-----|--------------------------------|
| 390 | th | 地位的代明的现代 | 9IE | TOTAL SERVICES |
| JATOT | J. F. T. See Fill Profited | 25 | 76 | ollow Up - Pregnancy Outcomes |
| | THE PARTY PARTY | 97 | 13 | ollow Up - Pregnancy Decisions |
| | The second secon | | | |

LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

| | 8/1/2018 | :əteO | February 2018 | Services Month: | Subcontractor Life Choices of North C |
|---|----------|-------|---------------|-----------------|---------------------------------------|
| ı | | | | | |

PARENTING/PRENATAL CLASSES

| 00: | Little Helpers Agency by Kim Robinson | 9 | 9 |
|-----------|--|---------------------|-------------|
| Ø 8₹/∠₹/ | | | |
| 00:9 | Dental Health by John Ward, DDS | 3 | 9 |
| @ 81/02/7 | | | |
| 00:9 | Let's Eat for the Health of It by Cathy Judd | S | Z |
| @ 81/81/7 | | | |
| 00:9 | Mewborn Care by Allie Young | 3 | 3 |
| @ 81/9/ | | | |
| | | | |
| 08:30 | Newborn Care by Beth Foster | 3 | Ţ |
| @ 81/27/ | | | |
| 9:30 | llassuA | 3 | I |
| @ 81/02/2 | sbenemA yd emusiT beaH svizudA bne 2012 | 2000 Law - 2000 X | |
| 08:8 | Breast Feeding by Amanada Russell | 3 | τ |
| Ø 81/81/1 | | Anna a garan agasa | |
| 9:30 | Newborn Care by Amanda Russell | 7 | τ |
| @ 81/9/1 | | | |
| Date | Topic | Total Bot Total Bof | elsM# lstoT |

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| 3/2/5017 | Date: | Feb-18 | Services Month: | Life Choices of North Central La | Subcontractor: |
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LOUISIANA ALLIANCE FOR LIFE Subcontractor Monthly Services Report

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| Nomen's Bible Study Group, The Bridge Church. Tour. Approximately 10 in attendance. | 7\28\2018 |
| Burgers and Bros" event for men's dorms at Louisiana Tech University. Approximately 50 in attendance. | 2/20/2018 |
| Spoke to Libery Baptist Church in Marion, La. Approximately 40 in attendance. | 8102/41/2 |
| Description | - Date |
| i.e. health fairs, speaking engagements, walks for life, etc. | |
| COMMUNITY OUTREACH ACTIVITIES | |

Workmen's Comp \$530.42/6=\$88.40 per staff

Budget revision effective 1/1/18-Moved \$3500 from Online Client Database to Advertising

286.67 178.50 159.37 156.18 159.37 1,099.46

| Family Values Resource institute, Inc. | | | | | July-17 | dualowed
July 17 | A | ₩g-17 | | 8 | apt 17 | 8 | 20,555 906 | NUMBER OF | Z . | 3 | | | | | 2000 | |
|--|-----------------------|--------------------------|------------------------|--|--------------------|---|---|---------------------|--|-------------|-----------------|---------------|-------------------|--|--|----------------|--|------------------|---|-------------|---------------|-----------------------------|
| Project Director, Barbara Thomas 90% | Budgeted
45,000.00 | Expenditure
30,000,00 | Remaining
15,000.00 | 3 | Jul-17 Supp | Supp#2 | Aug-17 Supp | | Aut17-\$2 | Sep-17 Supp | Chin | Oct-17 Supp | pp Supp#2 | 10% | Nov-17 Supp | • | Dec-17 | Jan-18 | 1537 | Feb-1 | Feb-18 Mar-1 | Feb-18 Mar-19 Apr-18 May-18 |
| Project Administrator, Michael Ferris 80% | 28,000.00 | 18,666.72 | П | 8 2,333.34 | 1 | | 2,333,34 | 0.00 | | 2,333,34 | | 3,/50.00 | + | | 3,750.00 | + | 3,750.00 | 3,750.00 | | 3,750.0 | Т | 9 |
| Education Specialist, Allison Davis 100% | 25,000.00 | 16,666.62 | П | П | П | | 2,089.33 | 0.00 | | 2,083.32 | | 2,083.33 | - | 2 | 2,083.33 | + | 2 083.33 | 2083.33 | | 083.33 | 2,083.33 0.00 | 0.00 0.00 |
| Compliance Officer, nell Thomas/Telisha Davis 70% | 24,500.00 | 16,333.32 | | | | 10 | 2,041.67 | 0.00 | 0.00 | 2,041.66 | | 2,041.66 | \parallel | | 2,041.66 | \dashv | 2,041.67 | 2,041.67 | 2 | 041.6 | П | 0.00 |
| Data Entry Specialist Patricia Brown 100% | 25,000.00 | 16,666.63 | | E. | 讀 | 1 | 2,083.33 | 0.00 | | 2,083.32 | | 2,063.33 | | 2 | 2.083.33 | | 2,083.33 | 2,083.33 | 2 | 283.3 | | 0.00 |
| Client Services Coordinator, Shirtey Walker 100% | 25,000.00 | 16,666.63 | | 1 | 15 | 1 | 2,089.99 | 0.00 | | 2,083.32 | | 2,083.33 | | | 2,083.33 | | 2,083.33 | 2,083.33 | 2.0 | 83 | | 0.00 |
| Ioni Silary | 172,500.00 | 114,999,92 | 57,500.08 | 15 | 18 | が大変ない | 14,375.00 | 0.00 | 8 | 14,374.96 | · SERBE | 14,374,99 | Fre 955533 | | 14,374.99 | A27 (FSS) | 14,375.00 | 14,375.00 | 14,375,00 | 뜅 | 惹 | 0.00 |
| Fringer of the control of the contro | 中西部南外 | 於極無傷 | 330 | 100 | 80 | 1000000 | おおおおい こ | | _ | | THE REPORTS | 2000年2月1日 | STA STAN | Sales (Sales | STATE OF | | S ECHICAL S | FEET S. F. F. F. | 8,500.03 | l | 1 | CHARLES AND |
| Project Director, Barbara Thomas 90% | 5,800.50 | 2,383.23 | 3,417.27 | 7 375.07 | 0.00 | | 286.88 | 0.00 | 0.00 | 286.88 | _ | 286.88 | | - | 286.88 | - | 286.88 | 286.88 | 28 | <u>و</u> ا | | 0.00 |
| Project Administrator, Michael Ferris 80% | 3,609.20 | 1,516.40 | | | | | 178.50 | 0.00 | 0.00 | 178 50 | 4 | 178 50 | + | + | 178 50 | + | 178 50 | 178 50 | 1 1 | , le | T | 0.00 |
| Education Specialist, 100% | 3,222.50 | 1,360.18 | | | 5.0 | | 159.37 | 000 | 000 | 159.37 | 1 | 156.19 | + | + | 150 37 | + | 150 27 | 150 37 | | | | 0.00 |
| Compliance Officer, Chanell Thomas/Talisha Davis 70% | 3,158.05 | 1,341.09 | | 1 | 9 | 1 | 156 19 | 000 | 8 8 | 156.10 | 1 | 160 37 | 1 | + | 156.10 | + | 159.37 | 159.37 | | 9 | Т | 0.00 |
| Data Entry Specialist, Patricia Brown 100% | 3,222.50 | 1,361,36 | | | 1 | | 150 27 | 0.00 | 0.00 | 150 27 | - | 160 27 | + | + | 156.19 | + | 156.19 | 156.19 | | | T | 0,00 |
| Client Services Coordinator, Shirtley Walker 100% | 3,222.50 | 1.363.36 | | | 7 | | 150 27 | 0.00 | 000 | 160 97 | | 160 27 | + | - | 76.66T | + | 10.00 | 75.8CT | Į | 1 16 | T | 2 6 |
| Total Fringes | 22.235.25 | 9 277.62 | 1 | 20 | ă | No. of Colors | 100000 | 0.00 | 23 | 100.07 | S NUMBER | /6.667 | EST SELECT | 2017/00/00 | 139.37 | Sales praces | 15,661 | 159.57 | | | | 0.00 |
| Tavel Expenses | STREET, STREET, ST | CANTER SECTION | 66 | 1 CONT. CO. C. | CHERNAL CO | A10.00 | - | 0.00 | - | 1,075.00 | Sales and a | Borgani't | | Section 2 | 1,099,68 | September 1991 | 1,059.68 | 1,099,68 | 1,099.58 | | 0 | 9.58 0.00 0.00 |
| Conference Travel | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | | 98 | 000 | 200 | 9 | No action spins | 9 | Color Color | 200000 | A STATE OF THE PARTY OF THE PAR | 2000 | Nothernoette | Saper State and | 219-50.00 | 12 | 1 | Condition of the |
| Routine Travel | 600.00 | 496.18 | | | | | 0.00 | 0.00 | 000 | 0.00 | 496.18 | 8 8 | + | - | 100 | + | 000 | 0.00 | | | 1 | 0.00 |
| Other | 400.00 | 286.72 | | | | | 000 | 000 | 000 | 000 | | 9 | - | - | 786.73 | + | 200 | 0.00 | | 5 E | 0.00 | 1 |
| Total Travel | 1,000.00 | 782.90 | 655 | 30636 | 8 | 1,118,981 | 8 | 900 | 9.00 | 450 | 496.13 | 000 | が金田田田 | (A) | 286.72 | | 800 | 8 | - Contract | 5 11 | 83 | 8 |
| Operating Services | 學是是學學 | の数の数の数 | を記さ | 18.00 M | 100 | 4年的政治教育 | C CHRONING | STATE OF THE PARTY. | · 数据推设 | 2015 | のない | 经济 理 经 | 200 M650 | を変える | いた体を表 | | STATE OF STA | を設定が | | 97.H | 1 | は現場が |
| Building Rent | 14,400.00 | 9,600.00 | 4,800.00 | 1,200.00 | 0.00 | | 1,200.00 | 0.00 | | 1,200.00 | | 1,200.00 | | _ | 1,200.00 | - | 1,200.00 | 1,200,00 | 1,200.00 | ᄋᆘ | П | 0.00 0.00 |
| Culines | 1,500.00 | 1,500.00 | | | | | 284.45 | 0.00 | 0.00 | 230.63 | | 112.33 | | | 207.61 | + | 205.29 | 102.76 | 0 | 9 1 | | 0.00 |
| Telephone | 3,000.00 | 2,000.00 | Į, | Γ | | | 250.00 | 0.00 | | 250.00 | | 250.00 | | | 250.00 | | 250.00 | 250.00 | 250.00 | اوا | | 0.00 |
| Maintenance | 10,284.00 | 6,666.75 | Т | 5 757,00 | 0.00 | | 757.00 | 0.00 | 0.00 | 917.75 | | 757.00 | | | 757.00 | | 757.00 | 1,207.00 | 757 | اوا | П | 0.00 |
| Cover using (Senon signs & other advertising outlets) | 6,500.00 | 2,000.00 | 4 | 0.00 | 0.00 | | 0.00 | 0.00 | 1,000.00 | 0.00 | 1,000.00 | 0.00 | | | 0.00 | | | 0.00 | | ĕ | Г | 0.00 |
| Printing Cooler Lapse | 1,200.00 | 965.12 | T | T | T | | 133.22 | 0.00 | 0.00 | - | 88.00 | | 119.38 | | | 134.82 | 112.90 | 132.70 | | 5 | | 0.00 |
| College Factor | 2,362.80 | 1,575.20 | | L | 0.00 | | 196.90 | 0.00 | 0.00 | 196.90 | | - | | L | | | 196.90 | 196.90 | 196 | اقا | | 0.00 |
| Tuesday and the second of the | 963.95 | 621.09 | 342.86 | 5 26.50 | 0.00 | | 24.65 | 0.00 | 00.0 | 12.75 | | 220.26 | | | 0.00 | | 126.05 | 197.43 | 11 | E | | 0.00 |
| Senire Drodder Training | 3,000.00 | 670.92 | 2 | | T | I | 0.00 | 0.00 | 0.00 | 0.00 | 230.60 | $\overline{}$ | 341.84 | L | 0.00 | | 98.48 | 0.00 | | 5 | | 0.00 |
| CONTROL LONGER LIGHTING | 250.00 | 0.00 | | | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | | | 2010 | 2007 | 0.00 | | 9.00 | 0.00 | | 5 | | 0.00 |
| Figuriario | 900.00 | 600.00 | T | T | T | | 75.00 | 0.00 | 0.00 | 75.00 | | 75.00 | | 1 | 75.00 | | 75.00 | 75.00 | 75 | 6 | | 0.00 |
| Lightlifty Instrument | 2,304.00 | 2,013.30 | Ļ | Ī, | | | 211.84 | 0.00 | 0.00 | 212.50 | 100 | 224.40 | Section 1 | がある。 | 215,11 | 1 | 215.11 | 417.01 | 242 | ii. | 242.33 0.00 | .33 0.00 0.00 |
| Online Client Database | 1,300.00 | 1,300.00 | 1 | T | 2 | | 0.00 | 222.81 | 0.00 | 222.81 | | | 222.81 | 200 | 222.81 | | 192.10 | 0.00 | | 15 | 0.00 0.00 | 0.00 0.00 |
| otal Operating | 9,000,00 | 00.0067 | 9 | 3 | - | | - | + | 8 | 0.00 | 1 | 1 | 250.00 | | 250.00 | 100 | 675.00 | 440.00 | 14 | 8 | 140.00 0.0 | 0.00 |
| Professional | 32,364.75 | 52,017,38 | 20,547.37 | 3,531.48 | 3 216.66 | 8 | 3,383.06 | 222.81 1 | 1,000.00 | 3,518.34 | .568.60 | 3.185.69 | 934.03 | A PERCENT | 3,374.43 1 | 134.82 | 4,109.83 | of states | 2,874.68 | 15 | ă | 0.00 0.00 |
| Evaluator | 10,800.00 | 8.000.00 | 2 800.00 | 1,700.00 | 000 | 0.0000000000000000000000000000000000000 | 8000 | O O O | NO STATE OF THE PERSON NAMED IN COLUMN 1 | 2000 | B-80-03-03 | 100 | 2000 | 200830 | And posterior | 2000 | CANDING CO. | 65mbhalanga | - 58 | III | ŝ | 100 SEE SEE SEE |
| Public Relations | 9,600.00 | 5,600.00 | | \neg | 7 | | 8000 | 000 | 8 | 90.00 | 1 | | 800.00 | | 900.00 | | 900.00 | 20.00 | 1 | 5 IE | 1 | 0.00 |
| Auditor | 11,500.00 | 4,000.00 | | | 7 | | 0.00 | 8 | 8 | 9 | - | \top | - | | 200.000 | | 00000 | 900.00 | | ۱۱ ج | T | 0.00 |
| Blank | 0.00 | 0.00 | | 1 | 7 | | 0.00 | 9 8 | 9 8 | 9 6 | 1 | 9.8 | | | 9 8 | | 200 | 0.00 | 4,000.00 | , lie | T | 9 8 |
| Accounting/ Bookkeeping Services | 32,000.00 | 21.561.19 | 10 | 3,7 | 1 | | 2 600 72 | 9 8 | Т | 0.00 | 1 | 0.00 | + | | 0.00 | | 00.0 | 0.00 | | i lë | T | 0,00 |
| Total Professional | | | 99 | 9 | ğ | 310 Ship | 27.5007 | 100 | 0.00 | 7,609.72 | 2000 | | State of the last | Service of the servic | 2,609.72 | CHARLES COLUMN | 2,609.72 | 2,609,72 | 2 | Жü | | 0.00 |
| Equipment (2 Ludopp) | 10000 | er ter's | 7 | 1,993.15 | 100 | 100 A 100 A | 4,309,72 | 0.00 | 21 | A,309.72 | 2000000 | 1,805.72 1 | 1,700.00 | BURNET A | 4,309.72 | | (305.72 | 4309.72 | 8,309.72 | 15 | 100 | .72 0.00 0.00 |
| The Charge | GOTOOPT | Off mon'T | 0,00 | | 26 | Series Series | 01-2 THE | | 100 | | 2000 | STATISTICS. | | | 1,000.00 | 100 | のではないので | Man Carlon | 52500 | 237 | Contract | CONTRACTOR OF |
| Cure ciarges | DE LES AND AND THE | 0.00 | 1 50 | 120 | | を成党 | 100000000000000000000000000000000000000 | はない | 384 | | の機能を | FEB 04258.07 | 100 TORS | なので | STATE OF | 高級 品 | が を の の の の の の の の の の の の の の の の の の | は できる | が機能 | 300 | 2662.5 AR | 深 中国的第三人称形式 |
| Signations | 215,000.00 | 99,800.00 | 320 | 0 13,200.00 | 0.00 | 1,000,000 | 14,200.00 | 0.00 | 1 | 12,200,00 | 1 200,00 1 | (13,200.00 | 1 | 200.00 15 | 400.00 | | 13,600.00 | 15,600.00 | | Ö | 0.00 0.0 | 0.00 0.00 |
| odi Oner Charges | 215,000.00 | 100,800.00 | 115,200.00 | 13,700.00 | 0.00 | EGS ST | 14,200,00 | 90.0 | 10000000000000000000000000000000000000 | | 1 00.002,1 | 13,200.00 | 0.00 | 1,200.00 15,400.00 | 400.00 | 心器企 | (Xe | 15,600,00 | 38,81 | 5 | 5.0 | 00.0 |
| ではない。これは、では、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、ないのでは、 | 学の意味がある。 | 語の対象の | No. | 26 | 建一种的 | の変形が | ないので | の語の対 | STATE OF THE PARTY | | | | | 40×18018 | | - | 1 | | | . 1 | _ | |
| | 529,200.00 | では、これの こうかいかい | Collection 198 happy | CHARLES PROPERTY NO. | Acres (See See See | State of Section 1 and California, | Charles Annual and | 100 | The same of the last | TALL SAND | を記る。 | が変変が | | 1200 S.Tool | | | | | CONTRACTOR OF THE PARTY OF THE | g | Š | STATE STATE STATES |